CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)			
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is:			
1.	The assumed business name which the ubusiness is:	ındersign	ed use(s) in the transaction of
	•	<u></u>	SIAL B
2.	The true name(s) and business address(e business under the assumed business na	es) of the me is/are	entity or individual(s) doing :
	Darwin Kossman	677	Complete Address
·		Twin	Falls 50 83301
3.	The general type of business transacted unique (mark only those that apply)	ınder the	assumed business name is:
4 4	Retail Trade Wholesale Trade Services Manufacturir Agriculture Construction		Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future correspondence should be addressed:	Phone nu	Imber (optional): <u>303-733-8483</u> -7337
	G82 Quincy Apt B		Submit Certificate of Assumed Business Name and \$20.00 fee to:
	Name and address for this acknowledgment copy is (if other than # 4 above):	nt	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
		۲	208 334-2301
		12/88	Secretary of State use only
Signature: Darwin Kossman		Revision 12/98	IDAHO SECRETARY OF STATE 03/01/2001 09:00
Printed Name: Darwin Kossman		59 4	CK: 586348672 CT: 142985 BH: 381848 1 @ 20.80 = 20.80 ASSUM NAME # 2
	(see instruction # 8 on back of form)	g:\corpYorms\abn.p65	#043097