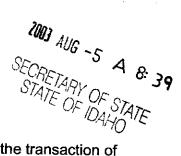


CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.



	DAHO TE
The assumed business name which the under business is:	ersigned use(s) in the transaction of
EAGLE HAZARD REDUCT	non
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:	
Name	Complete Address
Kobert Cogsuell	PO Box 4294
	15961 Rustic R.d
	MCCAIL Id 83638
3. The general type of business transacted under	er the assumed business name is:
Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: EAGLE HAZARD REDUCTION Resert Cogsuell Pollox Y294, MCCALL ID 83638 5. Name and address for this acknowledgment copy is (if other than #4 above):	Submit Certificate of Assumed Business Name and \$20.00 fee to: 25.00 Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 208-634-3431
	Secretary of State use only
	990
Signature: Poso Cognel	:001 001
Printed Name: Robert Cocsure!	Cornsistan forms: Revised 01/2001
Capacity/Title: OUNCR (see instruction # 8 on back of form)	See the second of the secretary of state of the secretary of the second of the secretary of the secretary of the secretary of the se

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