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 business is:		
2.	2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	Orchest O. Hibble Po. Box. S.		
	Rosemond J. Gribble Box 550	Knoskia, Id 83539	
3.	The general type of business transacted under the assumed business name is:  (mark only those that apply)		
	Retail Trade		
4.	The name and address to which future Phone number (optional): 208 926-0830 correspondence should be addressed:		
	P.O. Box 550 Kanskia , Idp. 83539	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:	
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	

Signature: Robert B. Milble

Printed Name: Robert R. Gribble

Capacity: <u>owner</u>

(see instruction # 8 on back of form)

Secretary of State use only IDAHO SECRETARY OF STATE

**09/19/2006 09:00** CK: 114 CT: 136183 BH: 349389

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