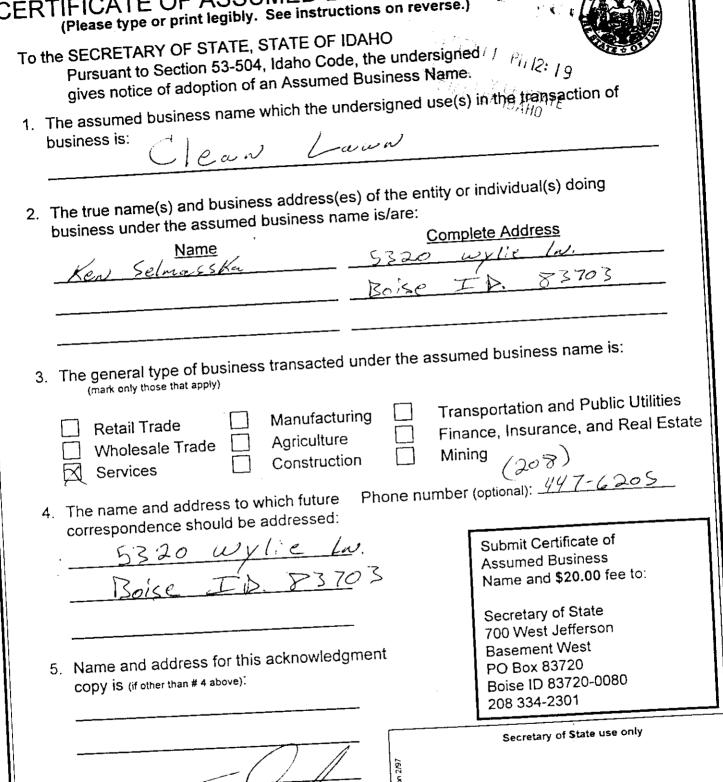
Signature:__

Capacity:

Printed Mame:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINES NAME (Please type or print legibly. See instructions on reverse.)



02/11/2004 05:00 CK: CASH CT: 158810 BH: 726861 1 8 25.00 = 25.00 ASSUM NAME # 2 73037

IDAHO SECRETARY OF STATE