CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idah	10 Code the undersigned with a con-
have a divigodiffed publicas Mail	e. the undersigned use(s) in the transaction of
Jitter Joez	-7 A:
The true name(s) and business address business under the assumed business Name	
Linda Thorsell	Address Rt 2 Box 223 Grangeville, Id. 83530
3. The general type of business transact See categories on the reverse	ted under the assumed business name is:
4. The name and address to which corre Jitter Joez 223 E M	spondence should be addressed: Nain Grangeville, Id. 83530
Signe	d Side Morall
By	Stark I Thoras
Capac	city Owner
Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer #
Secretary of State	Secretanic SECRETARY OF BTATE
700 West Jefferson PO Box 83720	10/07/1999 09:00 CK: 5881 CT: 121459 BH: 256361
Boise ID 83720-0080	1 @ 20.80 = 20.00 ASSUM NAME # 2
	D 7983