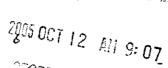


CERTIFICATE OF ASSUMED BUSINESS NAME

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

(see instruction # 3 on back of form)



Please type or print legibly. NOTE: See instructions on reverse before filing.	STATE OF STATE
1. The assumed business name which the undersigne business is: May Moving	od use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name 1834 We vin A. Tucker Cald Valerie S. Tucker	entity or individual(s) doing Complete Address Hwy 20/26 well, ZD. 83607
The general type of business transacted under the Moving of Household Goods Retail Trade Transportation and Pu Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, insurance, and Real Estate The name and address to which future correspondence should be addressed: Same 35 above	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
	PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above); SA We	Phone number (optional): (208) 454-3686
Signature: Melvin A. Jucker Volerie S. Tucker Brinted Name: Melvin A. Tucker Volerie S. Tucker Bright Capacity/Title: Owners.	Secretary of State use only

IDAHO SECRETARY OF STATE 10/13/2005 05:00 CK: 4127 CT: 158010 BH: 916551 1 0 25:00 = 25:00 ASSUM NAME # 2

1)92562