Capacity:

(see instruction # 8 on back of form)

CERTIFICATE OF A (Please type or print)  To the SECRETARY OF STA Pursuant to Section 53	ASSUMED BUSINESS NAME legibly. See instructions on reverse.  TE, STATE OF IDAHO  1-504, Idaho Code, the undersigned on of an Assumed Business Name state of the undersigned upon the transaction of the upon the
1. The assumed business name whi business is:	ich the undersigned use(s) in the transaction of A
business under the assumed business	
Ryon Nanto	1222 Broadway Ave.
(mark only those that apply)  Retail Trade	sacted under the assumed business name is:  ufacturing
4. The name and address to which for correspondence should be address 1227. Broadway Que.  Brise In 837070	(-
5. Name and address for this acknown 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
nature: Ry & Mast	Secretary of State use only  IDAHO SECRETARY OF STATE  99/11/2000 09:00  CK: CASH CT: 135778 BH: 347241  1 0 20.00 = 20.00 ASSUM NAME # 2

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