CERTIFICATE OF ASSUMED BUSINESS NAME, ED (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 8 MAR 23 PM 2: 3	
1. The assumed business name which the undersigned use(s) in the transaction of business is: H 3 H EXDRESS	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Larry F. Hill JR. +	Complete Address DBOX (DDD, St Maries 108380)
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 Pt correspondence should be addressed:	none number (optional): 25-2877
POBOX 1122	Submit Certificate of Assumed Business Name and \$20.00 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
	Secretary of State use only
	IDAHO SECRETARY OF STATE 93/23/1998 99:00
Signature: Quelle 7	03/23/1998 09:00 / CK: 1484 CT: 96284 BH: 93499 //
Printed Name: Lacol F Nill JR	1 8 20.00 = 20.00 ASSUM HAME
Capacity: DWNEN	D13292
(see instruction # 8 on back of form)	1