Capacity/Title: OWNE

(see instruction # 2 on back of lorn -

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

15 JUN 29 PM 2:08

Please type or print legibly. NOTE: See instructions on reverse before filing. STATE OF BAHO

2. The true name(s) and busing	ess address(es) of the	entity or individual(s) doing
business under the assumed Name	i business name:	Complete Address
la de ne Borde	15 225	1 1 1 1
De l'Artic	mt.	Home, Id. 83647
3. The general type of business	transacted under the	secumed husiness name is:
s. The general type of business	, transacted under the a	assumed business name is.
Retail Trade	Transportation and Pub	olic Utilities
Wholesale Trade	Construction	
Services	Agriculture Mining	Submit Certificate of Assumed Business
	•	Name and \$25.00 fee to:
•		Secretary of State
The name and address to which future correspondence should be addressed:		700 West Jefferson
came as abo		Basement West PO Box 83720
sume as abo		Boise ID 83720-0080
		208 334-2301
T. Nove and address for this a	aknowledgment	Phone number (optional):
 Name and address for this a copy is (if other than # 4 above). 	cknowledgment	587-0800
		907.0800
		Secretary of State use only

IDANO SECRETARY OF STATE

96/29/2005 05:00

CK: 6726 CT: 158810 BH: 818772

1 0 25.00 = 25.00 ASSUM NAME # 2

N 89255