

CERTIFICATE OF

ASSUMED BUSINESS NAME.

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

OI JUN 25 AM 9: 11

Please type or print legibly.

NOTE: See instructions on reverse before

SEURETARY OF STATE

139 15. See manucuons on reverse pero	re filing.	STATE OF IDAHO
The assumed business name which the undoposition business is: North West Hay		
	4/	Imited
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name MARK C. Clelland	:	Complete Address
3. The general type of business transacted und		
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	and Pub	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: Chris Clelland 17268 SAWD Hollow Rd CAIDWELL FD 83607		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above); 	t	Phone number (optional): 455 - 9809
		Secretary of State use only
Signature:	gkorpkormskabn formslabn.p85 Revised 01/2001	IDANO SECRETARY OF STATE 6/26/2001 09:00 CK: 2197 CT: 148895 BH: 484928 1 8 28.88 = 28.88 ASSUM MANE # 2
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