CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly)



1. The assumed business name which the u business is: 5 h / Lo VENT Co	
2. The true name(s) and business address(exbusiness under the assumed business name Name Dorney D. (e) Mans	s) of the entity or individual(s) doing ne is/are: <u>Complete Address</u> Po Box 30 Fike Toako 833: G 660 Hyw 30 Fike To8
3. The general type of business transacted un (mark only those that apply) Retail Trade Manufacturing Manufacturing Modesale Trade Agriculture Construction— 4. The name and address to which future correspondence should be addressed:	Transportation and Public Utilities Finance, Insurance, and Real Estat Mining
Soilo VENT Co. 9.0 BOX 30	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson
FIRR, IDAho 83328	I. Basement West
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 94/22/1998 69:00