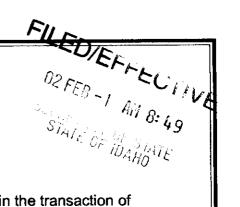


## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



Interface Tec	chnologies
The true name(s) and <u>business</u> address(es) or business under the assumed business name: <u>Name</u> Ronald Poincare Myers	of the entity or individual(s) doing <u>Complete Address</u> 5133 N Liverpool Ave, Boise, ID 83703
3. The general type of business transacted und  Retail Trade Transportation a	er the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Ron Myers  5133 N Liverpool Ave  Boise, ID 83703	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Phone number (optional): 208 853-1728
	Secretary of State use only
Signature: Ronald P Myers	IDAHO SECRETARY OF STATE  92/01/2002 95 # 99
Capacity/Title: Owner  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  ### Page