CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

	Pursuant to Section 53-504, Idah gives notice of adoption of an Ass			
1.	The assumed business name which the und business is:		- You	tion of
	Treasure Volley F. Duipmen	7 and	Truck Selvice	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	David wolfer Diskinson Tr. 30	o3 5,	Complete Address Laguer ST. Num	po.JD.8368
3.	The general type of business transacted und (mark only those that apply)	der the a	assumed business nan	ne is:
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction		Transportation and Pr Finance, Insurance, a Mining	
4.	The name and address to which future Phone number (optional): 20%-46/-7/8>			
	3035 LOCUST STREET Numpa IN		Submit Certificate Assumed Busines Name and \$20.00	s
	83686		Secretary of State 700 West Jefferso	
5.	Name and address for this acknowledgment copy is (if other than # 4 above):		Basement West PO Box 83720 Boise ID 83720-00 208 334-2301	
		<u>ნ</u>	Secretary of State us	e only
		/ision 12/99	IDAHO SECRETARY OF ST	TATE

Printed Name: Dave W Dickinson, Tr.

Capacity: <u>Owner</u>

(see instruction # 8 on back of form)

O3/09/2001 09:00 CK: 131 CT: 143355 BH: 383701

1 0 20.00 = 20.00 ASSUM NAME # 2

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