Signature:

Capacity: OWNER

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)





1. The assumed business name which the undersigned use(s) in the transaction of business is:

ACKERLAND ISON HOME IMPOURMENTS FREMIR'S

AARON ACKERLAND IRO AR	Complete Address PESIAN # 20 Engle 10 83
. The general type of business transacted under the as (mark only those that apply)	ssumed business name is:
Services Construction The name and address to which future Phone num	Transportation and Public Utilities Finance, Insurance, and Real Est Mining Mark The Property of the Propert
correspondence should be addressed: 1200 ARTESIAN # 38 Engle ID, 836/6	Submit Certificate of Assumed Business Name and \$20.00 fee to:
	Secretary of State
Name and address for this acknowledgment copy is (if other than # 4 above): Same AS # 4	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301

Printed Name: AARON ACKERIAND

09/23/1997 09:00 CK: CASH CT: 87553 BH: 48704

1 8 20.08 = 20.80 ASSUM NAME

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