## CERTIFICATE OF ASSUMED BUSINESS NAME

To the SECRETARY OF ST Pursuant to Section 5 adoption of an Assumed Bus	ATE, STATE OF I 3-504, Idaho Code siness Name.	DAHO e, the undersigned	DEC 31 6 45 AT 196  gives notice of ATE  STATE OF OBAHO
1. The assumed business rebusiness is:  ALL TER	name which the un		the transaction of
2. The true name(s) and bu business under the assuring Name  **BRET \( \xi \) SARAH HU	med business nam	ne is/are:	Address ReeT Boise, ID 83702
3. The general type of busin			ousiness name is:
4. The name and address to BRET HURLINER	913 N.	Brett Kung BRETT HUEBO	buer er
Submit Certificate of Ass Business Name and <b>\$20</b> Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080	umed	Customer #	IDAND SECRETARY OF STATE DATE 12/31/1996 0900 51049  CK #: 1033 CUST# 73995 ASSUM NAME  20.00= 20.00