С



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

submits for filing a certificate of Assumed Business Name

2004 SEP -2 AM 9: 01

STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

	DSL	west		
2. The tr	The true name(s) and business address(es) of business under the assumed business name: Name HIBEK, Inc.		of the entity or individual(s) doing : Complete Address 1805 13th St., PO Box 975, Lewiston, ID 83501	
	The general type of business transacted under the Retail Trade Transportation and Put Wholesale Trade Construction			
	Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$25.00 fee to:	
Corres HIBE 1805	ame and address to which future pondence should be addressed: K, Inc. 13th St., PO Box 975 ton, ID 83501	ĺ	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
	e and address for this acknowledgmen is (if other than # 4 above):	t	Phone number (optional):	
			Secretary of State use only	
nature:	(signature required)	g/corpt/orms/abn p65 Revised 04/2003	008218	
nted Name pacity/Title		g.\corptorms\e Revised	IDAHO SECRETARY OF STATE 99/02/2004 05 = 0 CK: 3111 CT: 158010 BH: 764/ 1 0 25.00 = 25.00 ASSUM NAM	