CERTIFICATE OF ASSUM (Please type or print legibly. State of the SECRETARY OF STATE, STATE) To the SECRETARY OF STATE, STATE of the SECRETARY OF STATE, STATE of the SECRETARY OF STATE of the SECRETARY OF STATE, STATE of the SECRETARY OF STATE, STATE of the SECRETARY OF OF	TE OF IDAHO I FEB 23 AM IO: 18 The code, the undersigned ssumed Business Name of STATE and of IDAHO of
2. The true name(s) and business address(es business under the assumed business name Name Lori Lee Cole Marty Doser	
3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade	
Head Quarters 1807 5, Kinhall Caldwell 10 83605 5. Name and address for this acknowledgment copy is (if other than #4 above):	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
Signature:	SIRAMINATE CARSTAGE DI2/23/2001 09:00 CK: 3594 C1: 142671 BH: 388882 1 # 20.00 = 20.00 ASSUM NAME # 2