

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 7004 MAR 24 AM 8: 36

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

(see instruction # 8 on back of form)

STATE OF IDAHO

 The assumed business name which the und business is:) of the en e:	tity or individual(s) doing Complete Address	\$-3434
SIBNEY J. CLINKECALCE	1109 W.	DUNN RD. POLATELLO, 10	63201
3. The general type of business transacted un	nder the a	ssumed business name is:	
Retail Trade Transportation			
 Wholesale Trade Services Manufacturing Mining Finance, Insurance, and Real Estate 		Submit Certificate of Assumed Business Name and \$25.00 fee to:	
 The name and address to which future correspondence should be addressed: 		Secretary of State 700 West Jefferson Basement West PO Box 83720	
SIDNEY J. CLINKSCALES		Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgm	nent	Phone number (optional):	
copy is (if other than # 4 above):		208-237-6208 208-922-9028	
SIBNEY J. CLINKSCALES		Secretary of State use only	
Signature: Signature réquired)	ghcorptformstabn formstabn.p65 Revised 64/2003	Dud:	518
Printed Name: SINNEY .T. CLINKSCALES Capacity/Title: OWNER	g.\corp\forms\aboungabon form	IDAHO SECRETARY 03/24/2004 CK: 5530 CT: 15801 1 0 25.00 = 25.00	מס:כמ ו