CERTIFICATE OF ASSUMED BUSINESS PARME (Please type or print legibly. See Instructions 80 February 18 AM 8: 42

The Control of the State of the	Pursuant to Section 53-504, Idaho Code, the undersigned of STATE gives notice of adoption of an Assumed Business Name. OF IDAHO	
1.	The assumed business name which the undersignusiness is:	gned use(s) in the transaction of
	Office Express	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Name	Complete Address
	Teresa I. Jones-Moore P.	O. Box 473, New Meadows, ID 83654
3.	The general type of business transacted under to (mark only those that apply) Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	he assumed business name is: Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future Phone number (optional):208-347-4465 correspondence should be addressed:	
	P.O. Box 473	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	New Meadows, ID 83654 Name and address for this acknowledgment copy is (if other than #4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	9	Secretary of State use only
	Jeli Don Moru	IDAHO SECRETARY OF STATE
Signatu	ire: Jen Jous Moon 1	05/18/2000 09:00 CK: 2883 CT: 131259 BH: 319829
Printed	Name: Teri Jones-Moore	1 8 26.80 = 20.80 ASSUM NAME # 2
Capaci	ty: Owner	7.35937

(see instruction # 8 on back of form)