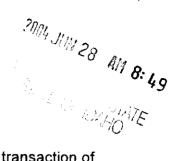


CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

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



TACO DEL MAR FRANKLIN			
The true name(s) and business address(e business under the assumed business na		entity or individual(s) doing	
Name		Complete Address	
		215 ANDREWS CREEK	
C155 344	MERID	IAN, ID 83642	
3. The general type of business transacted ι	under the	assumed business name is:	
X Retail Trade Transportation		blic Utilities	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: TROY HICKS 2215 ANDREWS CREEK MERIDIAN, ID 83642 5. Name and address for this acknowledgm copy is (if other than # 4 above):	e	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):	
SAME AS #4			
	,	Secretary of State use only	
gnature: How (signature required)	g¹corptorms\abn forms\abn p65 Revised04/2003		
	forms\abn form Revised 04/2003	TRAUD DEGREEADY	
······································	- B	IDAHO SECRETARY OF STATE	
inted Name: TRoy Hicks apacity/Title: PResident	forms	06/28/2004 05 CK: 9585 CT: 84365 RH: 752	