

CERTIFICATE OF ASSUMED BUSINESS NAME

FILEDALITICAVE

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

2003 FEB 14 AM 8: 39

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF IDAHO

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1. The assumed business name which the under	signed use(s) in the transaction of
business is: Strome Mobile Loc	CK & Key
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name: Name Name Deborah Evans	the entity or individual(s) doing <u>Complete Address</u> †22 N. Fillmore St., Jerome ID 83336 Same
3. The general type of business transacted unde	r the assumed business name is:
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: H22 N. Filmore St. Jerome, J. 63338 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 Phone number (optional): 208-324-6550
	Secretary of State use only
Printed Name: JUSON M. EVUNS Capacity: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 1002/1 4/2003 05:00 CK: 3423 CT: 158010 BH: 663161 1 0 20.00 = 20.00 ASSUM NAME # 2