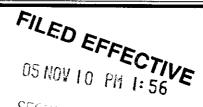


CERTIFICATE OF ASSUMED BUSINESS NAME

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.



SECRE OF STATE

1. The assumed business name which the under business is: Lynley Transcupt Transcupt	ersigne	d use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Name Name	of the e	entity or individual(s) doing Complete Address Boy 140134 J TD 83714-0134
3. The general type of business transacted und Retail Trade Transportation a		
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate		Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Robert Anders or P.O. Box 140134 Boist 10 83714-0134		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above): 	t	Phone number (optional):
	p65	Secretary of State use only
Signature: How Holl Sov Printed Name: Rown Hndl rSovl Capacity/Title:	g¹corp\forms\abn forms\abn.p65 Revised 04/2003	IDAHO SECRETARY OF STATE 11/10/2005 05:00 CK: 1267 CT: 158010 BH: 921656 1 @ 25.00 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	g:lc	D93530