(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME FILED (Please type or print legibly. See instructions on reverse.)

	To the SECRETARY OF STATE, ST Pursuant to Section 53-504, lo gives notice of adoption of an	daho Code, the	undersigned Stilleran
1.	The assumed business name which the business is:  Wood Restore Sys	undersigned us	se(s) in the transaction of
2.	The true name(s) and business address(business under the assumed business name  Name	, ,	
	Virginia L.OHIS	362 Ru	MUIEW DR. BOSE, 18837
3.	The general type of business transacted (mark only those that apply)  Retail Trade Manufactur Wholesale Trade Agriculture Services Construction	ring	ansportation and Public Utilities nance, Insurance, and Real Estate ning
4.	The name and address to which future correspondence should be addressed:  BIRGINIA L. OHLS  362 RIMUITU DD.  BOIST JA 837/6	Phone numbe	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State
5.	Name and address for this acknowledgm copy is (if other than # 4 above):  SAME AS 4	nent	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signatu	ire: Urymu Lows	Revision 1/88	Secretary of State use only IDAHO SECRETARY OF STATE  Ø5/06/1999 Ø9:00 CK: 648 CT: 115884 BH: 214823
-	Name: VIRGINIA L. CHUS	8	1 8 28.86 = 28.88 ASSUM MAME # 2
	ty: Owner	Yomskabn.p65	D 25701