Capacity: OWNER

(see instruction # 8 on back of form)

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

CERTIFICATE OF
ASSUMED BUSINESS NAME

2002 MAY - 6 AM 10: 21

NOTE: See instructions on reverse before filing

The true name(s) and <u>business</u> address(es) of the entity or indicate
business under the assumed business na Name Blaine Gault	cs) of the entity of Individual(s) doing ime: Complete Address PO Box 207 Laclede TO 8384/
The general type of business transacted Retail Trade Transportation	under the assumed business name is: on and Public Utilities
Wholesale Trade Construction	
Services	Submit Certificate of Assumed Business Name and \$20.00 fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
Blaine Gault POBOX 207 Laclede ID 83841	Boise ID 83720-0080 208 334-2301
POBOX 207 Lacted a TO 8384/ Name and address for this acknowledge.	208 334-2301
POBOX 207 Laclede ID 83841	208 334-2301

IDAHO SECRETARY OF STATE 05/06/2002 05:00 CK: 1863 CT: 158010 BH: 463809 1 8 28.88 = 28.88 ASSUM NAME # 2