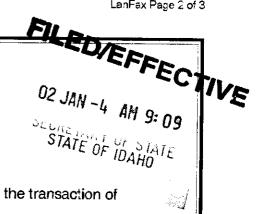
Capacity/Title: Owner

(see instruction # 8 on back of form)

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.



 The assumed business name which the undersited business is: 	igned use(s) in the transaction of
Mac- Pac Machine	r y
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Stephen V. Mackay P.C.	ne entity or individual(s) doing Complete Address Box 489 Sandpaint, Id 83864
3. The general type of business transacted under t	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: Stephen V. Macka, P.o. Box 489 Sandpoint, Tot 83864	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
 Name and address for this acknowledgment copy is (if other than # 4 above); 	Phone number (optional):
	Secretary of State use only
ignature: Stephen V. Mackay	
rinted Name: Stephen V. Mackay	

IDAHO SECRETARY OF STATE **61/04/2002 05:00** CK: 2201 CT: 155268 BH: 436832 1 0 20.00 = 20.00 ASSUM NAME # 2

