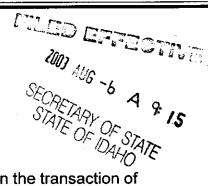


CERTIFICATE OF ASSUMED BUSINESS NAME

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

<u>Please type or print legibly.</u> <u>NOTE: See instructions on reverse before filing.</u>



The assumed business name which the under business is:	
SNAKE RIVER Sy	whetics
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Trans L. Spens	of the entity or individual(s) doing
3. The general type of business transacted unc	der the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: TRANS SPECIES 456 Suncise Blud. N. Twin FALCS Td. 83301 5. Name and address for this acknowledgment copy is (if other than #4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
	Secretary of State use only
Signature: Travis L Speers Printed Name: Travis L Speers Capacity/Title: OWNGR (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE ### 158016 ## 158016 BH: 694851 1 ## 25.00 = 25.00 ASSUM NAME # 2