Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE 2005 MAR -4 AM 9: 24

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

SECRETARY STATE OF TOAHOUTE

Please type or print legibly.
NOTE: See instructions on reverse before filing.

- CAMPBELL SALE	S COMPANY
2. The true name(s) and business address(es) of business under the assumed business name: Name TOHIU CAMPBILL F	
3. The general type of business transacted under	
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: SOHN CAMPBILL	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720
SOHN CAMPBELL BOX 363 BUHL, ID 83316	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above).	Frone number (optional): 208-543-0971
	Secretary of State use only

IDANO SECRETARY OF STATE

93/94/2005 95:00

CK: 947 CT: 158810 BH: 796688

1 8 25.88 = 25.88 ASSUM MANE # 2