FILED

## CERTIFICATE OF ASSUMED BUSINESS NAME

'98 AUG -3 AM II: 06'

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives patter of adoption of an Assumed Business Name.

1.	• • • • • • • • • • • • • • • • • • • •				
	business is:				
	The following	HILLEN			
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:				
,	Name			Address	
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		<del></del>		; [	1 1
3.	The general type of business transacted under the assumed business name is:				
	COD-Amaron				<u></u>
	See categories on the reverse			•	
4.	The name and address to which	correspond	lence should		MY LETE
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		Signed	t timeter	1 JAMA	
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		Capacity_	Brence	ant raw.	
		Capacity	Kinne	T. Shranning	<del></del>
	Submit Certificate of Assumed		Customer#		
	Business Name and \$20.00 fee	to:		IDANO SECRETARY OF STATI	
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	Secretary of State		20 E		133364
	700 West Jefferson PO Box 83720		Revision 10/98	1 8 26.66 = 26.66 ASS	UN NAME
	Boise ID 83720-0080		L	717189	
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