	CERTIFICATE OF ASS (Please type or print legible) To the SECRETARY OF STATE, S	SUMED BUSINESS NAME bly. See instructions on reverse.) STATE OF IDAHO 4, Idaho Code, the checking field	E
10 ± 0	Pursuant to Section 53-504,	4, Idaho Code, the care bigned an Assumed Business Name.	
1.	The assumed business name which the business is: Boise Kader	he undersigned use(s) in the transaction of	-
2.	The true name(s) and business address business under the assumed business Name Boise Koden Kan Peter G Florenzen JR	Complete Address 118 & 37th Street	_
2	Mathew J. Florenzen	93714	_
	Retail Trade Manufacture Wholesale Trade Agriculture Correspondence should be addressed:	ure Finance, Insurance, and Real Ection Mining e Phone number (optional): (208) 385 -0880	st
5.	Boise Koden Kan 118 & 37th street Boise ID 83719 Name and address for this acknowledge copy is (if other than #4 above): Pete Florenzen Jr. (1808 Albion	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	
	Boise ID 83705	Secretary of State use only IDANO SECRETARY OF STATE 96/13/2000 09:00 CK: CASH CT: 132344 BH: 325911	
Signature:		CK: CASH CT: 132344 PH: 325911	
Printed Name: Pete Florenzen			
Capacit	(see instruction # 8 on back of form)	— Sed right open of the sed of th	