CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO 98 MAY -8 AM 9: 02 Pursuant to Section 53-504, Idaho Code, the undersigned OF STATE gives notice of adoption of an Assumed Business state of IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: RANNY I. WALKER 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Mining Construction Services Phone number (optional): 535-05 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20,00 fee to: Secretary of State 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 CODY IS (if other than # 4 abqve): Boise ID 83720-0080 208 334-2301 AMEPSENDE APPLICATION

05/08/1998 09:00 CK: 139 CT: 98480 9H: 188843

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Printed Name: -

YRES, OEL Capacity:

(see instruction # 8 on back of form)

SOLE PROPRIETORSHIP RESOLUTION OF AUTHORITY

	By R.W. Carreting
	(285 N. EDEN DR.
	I.F., IDAHO 8340)
Date: 5-6-98	(City, State and Zlp Code) Proprietor's Federal Tax FO Number
I hereby certify that I, SANDY WALKE	
indersioned, am engaged in business under the trade name of	. W. Carpeting
he purpose of cashing or negotiating checks, drafts or other negotiable in nyse#f as owner, or by those authorized below I agree that:	oceptance of this Account under the above-designated trade name and this histruments payable to said trade name, and endorsed in said trade name.
	rithe funds of this proprietorship lice of its resoission or modification has been received and the inthit type.
Financial Institution. Any and all prior resolutions adopted by this proprietorship and peroprietorship's account(s), are in full force and effect, unless supplements	ad or modified by this authorization
(3) All transactions, if any, with respect to any deposits, withdrawals, redis-	counts and borrowings by or on benair or this propeletorarily with this rillings yed and confirmed
(4) Any of the persons named below, so long as they act in a representative	re capacity as agents of this proprietorship, are authorized to thake any and a no advisable for the effective exercise of their powers indicated below from
time to time with this Financial Institution, concerning funds deposited in the	his Financial Institution, moneys porrowed from this Financial institution subject to any restrictions stated below
(5) I warrant that I am the sole owner of the business whose trade name	is given on this form. If any other parties acquire all owness is a little ownership of the business is all #inquit.
restructured in any way. I shall notify this Financial Institution promptly. If	n the event ownership is changed in any way and room that I have some in the terms of this resolution and any account agreements that I have some in
(6) This proprietorship agrees to the terms and conditions of any acco	ny time, to charge this proprietorship for all checks, drafts, or other at the
the payment of money, that are drawn on this Financial Institution, regardly	less of by whom or by what means the facstinite signature is a little of any of the facstmile signature specimens that this proprieturship files we
this Financial Institution from time to time) and contain the required number	er of signatures for this purpose
if indicated, any person listed below (subject to any expressed restrictions	
Name and Title	Signature Facsimile Signature
(A) RANDY T. WALKER GUNER)	Commany f. Waller
(8)	
(C) (D)	
Indicate A. B. C and/or D	
(1) Exercise all of the powers listed in (2) thro	ough (6)
(2) Open any deposit or checking account(s)	in the name of this proprietorship
	ent of money and withdraw funds on deposit with this Financia Institution
	uthorized signatures required for this purposenotes are life of this proprietorship, sign, execute and deliver promissory notes are life.
evidences of indebtedness.	
	uthorized signatures required for this purpose
A Degree of the property of the control of the control of the	pledge bills receivable, warehouse receipts, bills of lading, stocks, bonds, or thereafter owned or acquired by this proprietorship as security for suf-
harrawed and to decount the same uni-	conditionally guarantee payment of all bills received, negotiated or discount est, notice of protest and notice of non-payment
A Number of a	uthorized signatures required for this purpose
(6) Enter into written lease for the purpose of	firenting and maintaining a Safe Deposit Box in this Financial Institution
Number of authorized persons requi Optional Notarization:	ired to gain access and to terminate the leasei
	Signature of Proprietor:
Subscribed and sworn to before me this	
day of, 19	Candy Walker
	Dansy The Day VEN
Notary Public	(Type Name of Proprietor Below Signature)
Notally Futility	(1900 Harris OLT 100 Harris Bulletin and Contraction