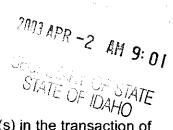


CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



World Sta	ar Packagir	ng
The true name(s) and business address(est business under the assumed business name	ne:	entity or individual(s) doing Complete Address P.O. Box 902 Parma, ID 83660
3. The general type of business transacted un		
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: World Star Packaging P.O. Box 902 Parma, ID 83660		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
 Name and address for this acknowledgme copy is (if other than # 4 above); 	ent	Phone number (optional):
		Secretary of State use only
nature:	n forms\abn.p65 09/2002	D(84099
pacity/Title: Owner (see instruction # 8 on back of form)	g/toorp/formstabn formstabn.p65 Revised 09/2002	IDAHO SECRETARY OF STATE 04/02/2003 05:00 CK: 1500 CT: 158010 BH: 67236 1 0 20.00 = 20.00 ASSUM NAME: