CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)				
		aho Code Assumed I	e, the undersigned Business Name SECRETARY OF STA	
1.	The assumed business name which the ubusiness is:	ındersigne	ed use(s) in the transaction of	
				. 33%
	Colby's SERVICE	<u>S</u>		
2.	The true name(s) and business address(e business under the assumed business na	es) of the e ime is/are:	entity or individual(s) doing	
	Ou s Name		Complete Address	
	Colly S. Peters 4	1617	E. Sherman AUE.	
	JENNIFOR K. PETERS	NAn	4PA ID 83686	ų,
3.	The general type of business transacted to (mark only those that apply)	under the a	assumed business name is:	
4	Retail Trade Manufacturing Wholesale Trade Agriculture Construction The name and address to which future		Transportation and Public Utilities Finance, Insurance, and Real Est Mining Imber (optional): (208) 461-9455	ate
••	correspondence should be addressed:	rnone na	irriber (opuoriai). (200) 181 7433	· · · · ·
	Colhy & Paters			
	Liny Tenes		Submit Certificate of Assumed Business	
	1617 C. Sherman AVE		Name and \$20.00 fee to:	
	NAMPA IJ 83686		Secretary of State	
5	1		700 West Jefferson	
J.	Name and address for this acknowledgme copy is (if other than # 4 above):	ent	Basement West PO Box 83720	
	Home Feperal		Boise ID 83720-0080	
	1		208 334-2301	
	500 12th AUE S. / P.O. Bex 190		Secretary of State use only	
	NAMPA, ID 83651	n 1/88	IDAHO SECRETARY OF STATE	7
Signatu	re:	Revision 1/96	03/04/1998 09:00 CK: 1004 CT: 95163 BH: 87505	,
Printed Name: Colby S. Peters				
Capacity: DWNER PRESIDENT				

(see instruction # 8 on back of form)