

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO -2 PM 1:18
 Pursuant to Section 53-504, Idaho Code, the undersigned
 gives notice of adoption of an Assumed Business Name

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Desert Sage Supply

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Sage Ryan Robert Williamson 6419 S Hornbeam Pl.
Boise, ID 83716

3. The general type of business transacted under the assumed business name is:
 (mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future Phone number (optional): _____
 d:

DESERT SAGE SUPPLY
 2404 BANK DR
 BOISE ID 83705

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

5. Name and address for this acknowledgment
 copy is (if other than # 4 above):

Signature: Sage Williamson

Printed Name: Sage Williamson

Capacity: _____

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

07/06/1999 09:00
 CK: none CT: 117619 DI: 231356

1 @ 20.00 = 20.00 ASSUM NAME # 2

D27327

Revision 2/97

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