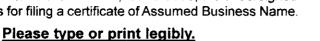


Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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





STATE OF IDAHO

FILED/EFFECTIVE

1. The assumed business name which the ubusiness is:	undersigned use(s) in the transaction of
RAR CUSTOM	PRODUCTS
2. The true name(s) and <u>business</u> address(e business under the assumed business name Name TODY ROSS	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
3. The general type of business transacted Retail Trade Transportati Wholesale Trade Constructio Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estat	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: RtR Custom Deanucts 253 uniquit Creek (1/44 NAMPATO B3686	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgr copy is (if other than # 4 above): 	ment Phone number (optional):
	Secretary of State use only
ignature: <u>Les Johnsons</u> rinted Name: <u>4009</u> Ross	- 10000 F STATE 10000