

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.

The assumed business name which the under business is: Knuckle Busters C	<u> </u>
	Complete Address 420-B.N. Kings Rd. Nampa M. 83687 120-B.N. Kings Rd. Nampa Id. 83687 120-B.N. Kings Rd. Nampa Id. 83687
3 The general type of business transacted und	er the assumed business name is:
Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 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 PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
	Secretary of State use only
Signature: Edward Lee Noll Capacity/Title: OWNER	Secretary of State IDAHO SECRETARY OF STATE
(see Instruction #8 on back of form)	03/22/2002 05:00 CK: 1186 CT: 158010 BH: 453989 1 8 20.00 = 20.00 ASSUM MAME # 2