	CERTIFICATE OF ASSU (Please type or print legibly.	JMED BUSINESS NAME See instructions on reverse.)
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name RETARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of the state of th		
1.	business is: Powell Recycl	The state of the s
2.	 The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: 	
	Name	Complete Address
	Dennis J. Powell	810 SOUTH BENTZ TROY, 10
	Kelly L. Powell	810 SOUTH Bentz TROY, 10
3.	The general type of business transacted (mark only those that apply)	under the assumed business name is:
4.	Retail Trade Manufacture Wholesale Trade Agriculture Services Construction (Recycling) The name and address to which future correspondence should be addressed:	Finance, Insurance, and Real Estate
	P.O. Box 354	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgm copy is (if other than # 4 above):	Secretary of State 700 West Jefferson
		Secretary of State use only IDAHO SECRETARY OF STATE
Signature: Dennis Powell		IDAHO SECRETARY OF STATE 99/20/2000 09:00 CK: 5761 CT: 136241 BH: 349591
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Capacity: 6wner		6,000 J 39 132
(see instruction # 8 on back of form)		