	CERTIFICATE OF ASSUN (Please type or print legibly. S	ee instructior	ns on reverse. FFECTIVE
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersighed gives notice of adoption of an Assumed Business Name.			
1.	The assumed business name which the unbusiness is: Log Restoration	dersigned use Systems	e(s) Mahe transaction of
2.	T 1 6 1	ne is/are: <u>Con</u> 0. <i>Bo</i> x /605	or individual(s) doing nplete Address 17 Crosscut Lane Ketchum ID 833 7 Wasdriver Dive Ketchum ID 833
3.	The general type of business transacted un (mark only those that apply) Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	g 🔲 Tra	nsportation and Public Utilities ance, Insurance, and Real Estate
4.	The name and address to which future Phone number (optional):		
	Log Kestoralion Systems 40 Josh Solly P.O. Box 4223 Ketchum Id. 83	340	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):	nt	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		_	Secretary of State use only
Signatu	ure: Johny W. Sy	Revision 1/98	IDAHO SECRETARY OF STATE 96/14/2600 09:00 : NO CK # CT: 132484 BH: 326335
Printed	Name: Joshva W. Solly		1 8 20.88 = 28.80 ASSUM NAME # 2
Capaci	ity: <u>General Partner</u> (see instruction # 8 on back of form)	g.toorpVormstabn.p65	036641