

## CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/EFFECTIVE

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

2002 MAY 28 AM 9: 39

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECHETARY OF STATE STATE OF IDAHO

<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li></ol>	
business under the assumed business name:  Name	Complete Address 500 Timberbutte Sweet Salesto
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture	
Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Tara S Cabra  Ro Box 105  Storest Ma E3670	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):	Phone number (optional):
Spdrug	Secretary of State use only
Signature: 1000 Signature: 100	IDAHO SECRETARY OF STATE  95/28/2002 05:00  CK: 1178 CT: 158818 BH: 468109  1 8 28 88 = 29.00 ASSUM NAME # 2
Capacity/Title:	1 8 28.90 = 29.00 ASSUM NAME # 2