CERTIFICATE OF ASSUMED BUSINESS (Please type or print legibly)	
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 Names ATE OF STATE	
The assumed business name which the undersigned use(s) in the transaction of business is:	
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  Name  James A Crosland 6 E Idaho St Paul Fd  James A Crosland Po. Box 487 Heyburn Id  833276	
James A Prostand Po. Box	487 Heyburn Id 83336
3. The general type of business transacted under the assumed business name is:  (mark only those that apply)	
Retail Trade	
4. The name and address to which future correspondence should be addressed:  Tames A. Crosland	Submit Certificate of Assumed Business
P. OBOX 487 Heyburn Id. 83336	Name and \$20.00 fee to:  Secretary of State  700 West Jefferson
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
1647	Secretary of State use only IMME SECRETARY OF STATE
Signature: James Alusland.	05/28/11/98 09:00 DX: 1690 CT: 99318 BH: 114469 1 28.98 = 28.88 ASSUM NAME
Printed Name: James A Crostand  Capacity: Managur  (see instruction # 8 on back of form)	D 15291
(see instruction #8 on back of form)	Te " "