CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO 99 0CT 20 AH ID: 49 Pursuant to Section 53-504, Idaho Code, the undersigned

	gives notice of adoption of an	Assumed Busin	ess Name. OF IDAHO
1.	The assumed business name which the undersigned use(s) in the transaction of the business is:		
	P.I. PROCESS		
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	<u>Name</u>	Cor	nplete Address
	PAMELA R. LARSON	206 N 4TH AVE PMB #102 SANDPOINT, ID 83864 206 N 4TH AVE PMB #102 SANDPOINT, ID 83864	
	PATRICK D. LARSON		
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
	Retail Trade Manufacturi Wholesale Trade Agriculture Services Construction	Fin	nsportation and Public Utilities ance, Insurance, and Real Estate ing
4.	4. The name and address to which future correspondence should be addressed:		
	P.L. PROCESS 206 N 4TH AVE PMB #102		Submit Certificate of Assumed Business Name and \$20.00 fee to:
5 .	SANDPOINT. ID 83864 Name and address for this acknowledgm	ent	Secretary of State 700 West Jefferson Basement West
	COPY is (if other than # 4 above): (SAME AS ABOVE)		PO Box 83720 Boise ID 83720-0080 208 334-2301
		88	Secretary of State use only INMO SELECTION OF STATE
ignatu	ure: tamela Rayson	Ravision 1/86	10/20/1999 09:00 0k: 1239 CT: 121976 NK: 239577 1 0 28.00 = 28.00 ASSM NAME 0 2
	Name: Pamela R. Larson	9901	N 0011 N
Capaci	ity: PRESIDENT OWNER	metabn.p86	030162

(see instruction # 8 on back of form)