



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2005 AUG 22 AM 9:34

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.
NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

TERRY'S DISTRIBUTING

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>RIVERS WEST INC</u>	<u>5600 WAYNE LN.</u>
<u>(C 138778)</u>	<u>Nampa ID 83686</u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

5600 WAYNE LN.
Nampa ID 83686

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: Harold M. Johnson
(signature required)

Printed Name: HAROLD M. JOHNSON

Capacity/Title: PRESIDENT
(see instruction # 8 on back of form)

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

Secretary of State use only

g:\comptons\stbn\form\stbn.p65 Revised 04/2003

IDAHO SECRETARY OF STATE
08/23/2005 05:00
CK: 4446 CT: 191606 BH: 987698
1 @ 25.00 = 25.00 ASSUM NAME # 2

D90880