CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)  To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned.	
To the SECRETARY OF STATE, STATE OF I Pursuant to Section 53-504, Idaho Code gives notice of adoption of an Assumed	DAHO e, the undersigned of the u
<ol> <li>The assumed business name which the un business is:</li> </ol>	
S. T. K. S.	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Linda S. Brooks	P.O. Box 1309
	Hayden, ID 83835
The general type of business transacted under the assumed business name is:     (mark only those that apply)	
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining	
The name and address to which future Phone number (optional):  correspondence should be addressed:	
Linda & Brooks P.O. Box 1309	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Hayolen, ZO 83835  5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson ent Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
	IDAHU SECRETARY OF STATE
Printed Name: Linda S. Brooks	© U4/20/2001 09:00 CK: #i CT: 145318 BH: 392478
Printed Name: Linda S. Brooks	
Capacity: Ownu	9 20.00 = 20.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	D44602