Capacity: OWNSTE

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 8: 39	
To the SECRETARY OF STATE, ST Pursuant to Section 53-504, I gives notice of adoption of an	ATE OF IDAHO daho Code, the undersigned STATE OF IDAHO AND STATE OF IDAHO ASsumed Business Name.
 The assumed business name which the business is: 	
FNDEPENDENCE LOC	Homes & Supply
The true name(s) and business address business under the assumed business n	· · · •
Douglas J. Schleis	2150 S. Cuft TS
	BOSE FD. 83705
The general type of business transacted (mark only those that apply)	under the assumed business name is:
Retail Trade Manufacture Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed:	Phone number (optional):
- HENE	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgm copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IBANO SECRETARY OF STATE
Signature:	96/09/1999 69:00 CX: 1133 CT: 76007 3H: 223977
Printed Name: Druglac T. Schleis	1 6 28.08 = 28.00 ASSUM NAME 1 2
Capacity: 1071) A/1077	D 2666