CERTIFICATE OF ASSUMED BUSINESS NAME

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 Name.

1.	The assumed business name which the undersigned use(s) in the transaction of business is: YOUR HANDYMAN	
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	ANTHONY R. ZORNIK 900 5- HWY 55	
	P.O. BOX 44	
	ANTHONY R, ZORNIK 900 S. HWY 55 P.O. BOX 44 CASCADE, ID 836	(/
3.	3. The general type of business transacted under the assumed business name is:	
	GERVICES	
	See categories on the reverse	, i
4.	4. The name and address to which correspondence should be addressed: TONY ZORNIK P. D. BOX 44 CASCAGE ID 83611 Signed Mony R. Sormh By Capacity	
	Submit Certificate of Assumed Business Name and \$20.00 fee to:	
	Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080 Secretary of State	IDAHO SECRETARY OF STAT 1/09/1997 0900 53381