CERTIFICATE OF ASSUMED BUSINESS NAME

08 APR -7 AM 8: 43

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

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before	re filing.
1. The assumed business name which the und business is: B+S Distributing	
 The true name(s) and business address(est business under the assumed business name Name Clark & Scott Mitch Scott The general type of business transacted under the assumed business address(est business name name) 	Complete Address 6/27 N 156 Idaho Falls JA8340/ 14 N Bassett Rd Idaho Falls Jd- 83402
	Submit Certificate of Assumed Business Name and \$25.00 fee to:
5. Name and address for this acknowledge copy is (if other than # 4 above): Zions Bank 123.5 S Utah Ave Tdaho Falls Id 83402 Signature: A R Suft (signature required) Printed Name: Mark R. Scott Capacity/Title: Mark R. Scott (see instruction # 8 on back of form)	Secretary of State use only