CERTIFICATE OF	
ASSUMED BUSINESS	NAME FILED/EFFECTIV
Plaze time -	ness Name.
sos instructions on reverse before	SECRETARIA SECRETARIA SATE
<ol> <li>The assumed business name which the under business is:</li> </ol>	signed use(s) in the transaction of
<ol> <li>The true name(s) and <u>business</u> address(es) of the business under the assumed business name:</li> <li><u>Name</u></li> </ol>	the entity or individual(s) doing <u>Complete Address</u>
Dector Raymond pencer ZI	3E. 3d St.
<ul> <li>3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction</li> <li>Wholesale Trade Gonstruction</li> <li>Services Agriculture</li> <li>Manufacturing Mining</li> <li>Finance, Insurance, and Real Estate</li> <li>4. The name and address to which future correspondence should be addressed:</li> <li>Drost Portraits</li> <li>Z13E. 3rd St.</li> <li>Marcidian, Tdaho 83642</li> <li>5. Name and address for this acknowledgment copy is (if other than #4 above):</li> </ul>	he assumed business name is: Public Utilities Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 208-508-5102
nature: <u>Aleccanuc</u> <u>Alencoc</u> nted Name: <u>Dounce</u> <u>L. pence</u> pacity: <u>OWN</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE         07/19/2001         05:200         CK: 1297         1 8         28.00         28.00         28.00