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 gives notice of adoption of an Assumed Business Name.	
The assumed business name which the unbusiness is:      AFFOLDABLE	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:      Operation Address	
Kim S. Fullner	Complete Address 9847 W. ESHELMAN ST.
	BOISE, 10 83704
The general type of business transacted ur (mark only those that apply)	nder the assumed business name is:
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate Mining
<ol> <li>The name and address to which future P correspondence should be addressed:</li> </ol>	Phone number (optional): (208) 321-0050
SAME AS ABOVE	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgmen 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
	IDAHO SECRETARY OF STATE  88/12/1998 69:80
Printed Name: Kim S. Fullner	CK: CASH CT: 182643 BH: 136154
Printed Name: KIM S. FULLMER  Capacity: OWNER	D 1410
(see instruction # 8 on back of form)	Logal