

CERTIFICATE OF

ASSUMED BUSINESS NAME 2005 OCT #7 All 9: 18

submits for filing a certificate of Assumed Business Na	meS_CR=TADA
Please type or print legibly. NOTE: See instructions on reverse before filing.	STATE OF STATE
The assumed business name which the undersigned business is: Anderson Thispections	use(s) in the transaction of
2. The true name(s) and business address(es) of the elebusiness under the assumed business name: Name Local Crof	Complete Address Sox 24 100 To 83544
3. The general type of business transacted under the a	ssumed business name is:
Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: ANGLESON TOPPLOTO Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
Signature: Signa	IDAHO SECRETARY OF STATE 10/07/2005 05:00 CK: 7223 CT: 158818 BH: 915784 1 0 25.00 = 25.00 ASSUM NAME #