DK44426



CERTIFICATE OF

ASSUMED BUSINESS NAME
Pursuant to Section 53-504, Idaho Code, the undersigned Submits for filling a certificate of Assumed Business Name.

SECRE RY OF STATE

	Please type or print legibly. Instructions are included on back of application	SECH STATE OF IDAHO
1.	The assumed business name which the undersigned business is:	ed use(s) in the transaction of
2.	The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name LORNA L. THORNTON ARWYN D. THORNTON	entity or individual(s) doing Complete Address 1902 - KRRU HOLLUKOAN MERICAN FALLS IN 83211
3.	The general type of business transacted under the Retail Trade Transportation and Polymer Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4.	The name and address to which future correspondence should be addressed: Same As Habre	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	
Printe Capa	ed Name: PARTNER / TWNER	Secretary of State use only IDAHO SECRETARY OF STATE
Signature:		