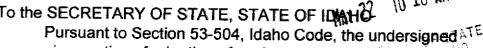
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse) 197 To the SECRETARY OF STATE, STATE OF IDMAND





Pursuant to Section 53-504, Idaho Code, the undersigned ATE gives notice of adoption of an Assumed Business Name.	
The assumed business name which the ur business is: Ocksider Restauran	
The true name(s) and business address(est business under the assumed business name Name	s) of the entity or individual(s) doing ne is/are: <u>Complete Address</u>
Moonraker Development Droup, L. L. C.	3000 N. Lakeharbor Lane Boise, Idaho 83703
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	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4. The name and address to which future P correspondence should be addressed: **Docksider Restaurant + Lou 3000 N. Labeharbor Lane**	hone number (optional): 208-853-258.3 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
Signature: Kathy M. Myers Printed Name: KATHY M. MYERS	Secretary of State use only IDAHO SECRETARY OF STATE DATE 05/22/1997 0900 95202 2 CX #: 14 CUST# 81830 RSSUM NAME 10 20.00= 20.00

Capacity: (JEN)ERAL

(see instruction # 8 on back of form)