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 1: 34 gives notice of adoption of an Assumed Business INAME FOR STATE VI 1. The assumed business name which the undersigned Isse(s) White transaction of business is: CRYSTAL OLSAN BIR SYSTAMS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address Will FORD E OVERGAARD Complete Address

Name	<u> </u>	143 WINTER DR
JOANNE OVERGAARD		Boist, IUMHO 83
The general type of business transacted under the (mark only those that apply)	assur	med business name is:
Retail Trade	Fina Min	
correspondence should be addressed:		r (optional): <u>208 345 480</u>
W.E. OR JOHNNE OVERGAART	> '	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Boiss, IO4HO 93706		Secretary of State 700 West Jefferson Basement West
Name and address for this acknowledgment copy is (if other than # 4 above):		PO Box 83720 Boise ID 83720-0080 208 334-2301
	WILFORD E OVERGAARD TORNNE OVERGAARD The general type of business transacted under the (mark only those that apply) Retail Trade	WILFORD € OVERGAARD The general type of business transacted under the assure (mark only those that apply) Retail Trade

Signature: William & Quenque (

Capacity: GENERAL PARTNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE .

02/02/1998 09:00 CK: none CT: 93587 BH: 78172

1 0 20.00 = 20.00 ASSUM NAME

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