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 MAY 24 gives notice of adoption of an Assumed Business Name.

1.	The assumed business name which the undersigned up business is: Keep I+ Personal	use(s) in the transaction of TRIE
2.	The true name(s) and business address(es) of the enti- business under the assumed business name is/are: Tina M. Ressnail Co	ity or individual(s) doing omplete Address 120 Po-Flatch, Tclaho 83855
3.	Wholesale Trade Agriculture Fi	sumed business name is: ransportation and Public Utilities inance, Insurance, and Real Estate lining
	The name and address to which future correspondence should be addressed: Tina M. Ressnall Potatch, Toaho 83855 Name and address for this acknowledgment	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West
0.	COpy is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE

Signature: Jina M. Madrall

Printed Name: Tina Pressnall

Capacity: OWNER

(see instruction # 8 on back of form)

05/24/2000 09:00 CK: 4189 CT: 131523 BH: 320663

1 @ 20.00 = 20.00 ASSUM NAME # 2

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