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. The assumed business name which the undersigned use(s) That the that saction of the control o	
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Gary R. Johnson	Complete Address 59 South Rolling Green Street
	Nampa, Idaho 83687
The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade	
4. The name and address to which future correspondence should be addressed:	
59 South Rolling Green St Nampa, Idaho 83687	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgmer 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
	Secretary of State use only
Signature: Signature:	Maria and Control of the Control of
Printed Name: Gary R Johnson	IDAHO SECRETARY OF STATE OB/23/2003 05:00 CK: 2110 CT: 158010 BH: 687343
(see instruction # 8 on back of form)	99 1 8 25.68 = 25.88 ASSUM NAME # 2