CERTIFICATE OF

TO EFFECTIVE

ASSUMED BUSINESS NAME
Pursuant to Section 53-504, Idaho Code, the undersigned 004 0CT 27 AM 9: 15 submits for filing a certificate of Assumed Business Name.

STATE OF IDAHO

Please type or print legibly.

The assumed business name which the business is:	
The true name(s) and business addres business under the assumed business Name	s(es) of the entity or individual(s) doing
	d under the assumed business name is:
Services Agricultur Manufacturing Mining Finance, Insurance, and Real Est	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed:	"" I ZUM 3 34-Z 300
 Name and address for this acknowled copy is (if other than #4 above): 	gment Phone number (optional):
	Secretary of State use only
ignature: S. Ken ' (signature required) rinted Name: Michael S. Kinzer apacity/Title: Owner	Secure S