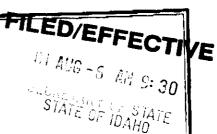
227

## CERTIFICATE OF CO NAME



Pursuant to Section 53-504, Idaho Code, the undersigne submite for filing a certificate of Assumed Business Nam  Please type or print legibly.  NOTE: See Instructions on reverse before filing.	od // // 0.30
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Donnal Dhitton 4778 Wickers Place  Hose ID 83715	
3. The general type of business transacted under the a  Retall Trade  Transportation and Pub  Wholesale Trade  Construction	<u> </u>
Services Agriculture Manufacturing Mining Finance, insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:  Donna Whitson  4278 Wisteria Place 120156 ID 83713	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (# other than # 4 above):	Phone number (optional):  208-376-8388
Signature: Deno Whitson Printed Name: Donno Whitson Capacity: Owner (see Instruction # 8 an back of form)	Secretary of State use only

IDAHO SECRETARY OF STATE

08/06/2001 05:00

CK: 1284 CT: 149695 BH: 411859
1 0 20.00 = 20.00 ASSUM NAME # 2

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