CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idah gives notice of adoption of an As	no Code, the undersigned
1. The assumed business name which the und business is: TECH=KELIEF	dersigned use(s) in the transaction of
2. The true name(s) and business address(es) business under the assumed business name Name Fray JIMA ASHKEY FRAY	
3. The general type of business transacted un (mark only those that apply) Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	
4. The name and address to which future correspondence should be addressed: 5/8/1/. LIVERPOOL AVENUE BOISE, ID 83703. (AFTER SEPT 25, 2000)	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5. Name and address for this acknowledgmen copy is (if other than # 4 above): 1770 WEST STATE ST, #15	PO Box 83720
<u>Buist</u> , 10 83702. Signature: <u>All Afroy</u>	Secretary of State use only IDAHO SECRETARY OF STATE 69/14/2000 69:00 CK: HO CHECK # CT: 135964 BH: 348178
Printed Name: JILL A. PAAY	1 2 28.80 = 26.00 ASSUM NAME # 2
Capacity: PARTNER	D 3431
(see instruction # 8 on back of form)	V JV (J)