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

	Pursuant to Section 53-504, lo gives notice of adoption of an	
1.	The assumed business name which the undersigned use(s) in the transaction of business is:	
	Intelitek	
2.	The true name(s) and business address(sbusiness under the assumed business na	
	Dean Schilling	450 W. Grove # 40Z Boise, Id. 8370Z
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)	
	Retail Trade Manufacturi Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
	The name and address to which future Correspondence should be addressed:	
	Dean Schilling 450 W. Grove # 402	Submit Certificate of Assumed Business Name and \$20.00 fee to:
	Boise, Id. 83702	Secretary of State
	Name and address for this acknowledgmecopy is (if other than # 4 above):	700 West Jefferson
		Secretary of State use only IDAHO SECRETARY OF STATE 8 95/17/1999 09:00 CK: 2847 CT: 115581 BH: 217244
Signatu	2 (21.11:/	1 0 20.00 = 20.00 ASSUM NAME # 2
	Name: Dean Schilling	nda
Capacit	(see instruction # 8 on back of form)	D 260 78