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

To the SECRETARY OF STATE, STATE OF IDAHO



1		the undersigned use(s) in the transatetion of STATE OF IDAHO
	BROKEN GUN HQ	
2	The true name(s) and business addre business under the assumed business Name WM. S. TEETER	ess(es) of the entity or individual(s) doing s name is/are: <u>Complete Address</u> 1833 GRANDVIEW LN, BURLEY, IDAHO 83318
	CYNDY TEETER	
	Retail Trade	b
4.	Wholesale Trade Agricultur Services Construct The name and address to which future correspondence should be addressed: WM. S. TEETER	re Finance, Insurance, and Real Estat tion Mining Phone number (optional): 208-878-8487
4.	Services Construct The name and address to which future correspondence should be addressed:	Finance, Insurance, and Real Estate Mining Phone number (optional): 208-878-8487 Submit Certificate of
4.	The name and address to which future correspondence should be addressed: WM. S. TEETER	Finance, Insurance, and Real Estate Mining Phone number (optional):
5. 1	Services Construct The name and address to which future correspondence should be addressed: WM. S. TEETER 1833 GRANDVIEW LN	Finance, Insurance, and Real Estate Mining Phone number (optional):
5. 1	Construct The name and address to which future correspondence should be addressed: WM. S. TEETER 1833 GRANDVIEW LN BURLEY, IDAHO 83318 Name and address for this acknowledge copy is (if other than # 4 above): D.L. EVANS BANK ATTN; DIANE ALVEY	Finance, Insurance, and Real Estate Mining Phone number (optional):

06/23/2003 05:00 CK: NO CK # CT: 158010 BH: 687295 1 0 25.00 = 25.00 ASSUM NAME # 2

Capacity: OWAR

(see instruction # 8 on back of form)