CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transætionன் business is: Medley TILE 2. The true name(s) and business address(es) of the entity or individual(s) বিত্তান্ত business under the assumed business name is/are: Name Complete Address Kurt Medley 1901 Truman ST. Complete Address NAMPA, Id. 83686 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing 11 Retail Trade Finance, Insurance, and Real Estate Wholesale Trade Agriculture Mining Construction M. Services 4. The name and address to which future correspondence should be addressed: Submit Certificate of **Assumed Business** Medley TILE Name and \$20.00 fee to: 1901 TRUMAN ST. Secretary of State NAMPA, Id. 83686 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 Boise ID 83720-0080 CODY IS (if other than # 4 above): 208 334-2301

Farmers & Merchants State Bank 112 2nd Street South Nampa, Id 83651

Printed Name: KURT Med/e)

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE ONly

86/62/2000 09:00 CK: 48364 CT: 45888 BH: 323823

1 @ 28.86 = 28.68 ASSUM NAME # 2

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