

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing.

business is: ASPENRIDGE MO	ORTGAGE INC.
2. The true name(s) and business address(es) business under the assumed business name Name ASPENRIDGE INC.	Complete Address 790 ENGLEMAN, REXBURG 10 83440
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: ASPENRIDGE INC. 790 ENGLEMAN REXBURG, ID 83440	Submit Certificate of Assumed Business Name and \$25.00 fee to: 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 (if other than # 4 above):	Phone number (optional): 208-356-3434
Signature:	Secretary of State use only IDANO SECRETARY OF STATE 94/14/2004 05:00 CX: 1824 CT: 158010 DH: 739138 1 0 25.60 = 25.60 ASSUM NAME 1 2
Capacity/Title: OWNER (see instruction # 8 on back of form)	D75319