CERTIFICATE OF ASSUMED BUSINESS NAME

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 transaction of business is: | | | |
| | Lamm 8 | Interpri | 515 | |
| | | <u>l</u> | | |
| 2. | The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: | | | |
| | | | | Addroso |
| | <u>Name</u> | | · | <u>Address</u> |
| | Kenna L. Arrington | | 3023A E. 3400 N. TwinFalls, ID B3301 | |
| 3. | The general type of business transacted under the assumed business name is: | | | |
| | Services | | | |
| | See categories on the reverse | | | |
| | • | | | |
| | | | | |
| | The name and address to which correspondence should be addressed: | | | |
| • | Kenna L. Arrington | | | |
| |) | | | |
| | 3023A E. 3400 N., Twin Falls, ID, 83301-0321 | | | |
| | | Signed _ | Kanna - | Parinoton |
| | | oigned _ | 1/ | 1 |
| | | Ву _ | Kenna L | Arrington |
| | | Capacity | Sole prop | rietor |
| | Submit Certificate of Assumed | | Customer# | J. 8 |
| | Business Name and \$20.00 fee to: | | | |
| | _ | | 1 | Secretary of State use only |
| | Secretary of State | | 8 | |

Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080

LDANG SECRETARY OF STATE

12/29/1999 69:66 CK: NO CK # CT: 124578 BH: 277188

1 0 20.00 = 20.00 ASSUM NAME # 2

D 31764

Mormstation and