

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2005 JUD - 6 BY 0-16

Please type or print legibly. NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of LN VEST IGATIONS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address TADA S. HAVUOR PO. BOX 1747 SAND POINT. To. 83864 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Manufacturing Submit Certificate of Mining **Assumed Business** Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future correspondence should be addressed: Secretary of State 700 West Jefferson AGENCY LNUESTIGATIONS Basement West PO Box 83720 P.O. BOX 1747 Boise ID 83720-0080 JANA POINT 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): copy is (if other than #4 above). 208.263.3223 Secretary of State use only

Signature: 7 Printed Name: 2 Capacity/Title:_

(see instruction #8 on back of form)

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