CERTIFICATE OF ASSUMED BUSINESS NAM (Please type or print legibly. See instructions on reverse:) 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: GREAT VACATIONS 1 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address RIVERS 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction 4. The name and address to which future Phone number (optional): _ correspondence should be addressed: GREAT VACATIONS Submit Certificate of Assumed Business Name and \$20.00 fee to: KETCHUM, 10.83340 Secretary of State 700 West Jefferson Name and address for this acknowledgment Basement West CODY is (if other than #4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAMO SECRETARY OF STATE

Signature: Jullen Ekwe

Printed Name: KATHLEEN E.

Capacity: PRESIDENT

(see instruction # 8 on back of form)

68/14/1998 69:00 CK: 1294 CT: 182735 RH: 136887

20.00 = 20.00 ASSUM WATE

