## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions predictions of the SECRETARY OF STATE, STATE OF IDAHO (DEC.) Pursuant to Section 53-504, Idaho Code, the undersigned 8:49 gives notice of adoption of an Assumed Business Name.

The assumed business name who business is:	ich the undersigned use(s) in	the than spection of
ENVIROF	DREST LLC.	
The true name(s) and business a business under the assumed business.	ddress(es) of the entity or inciness name is/are:	lividual(s) doing
Pippin Plantation, L	Complete 1507 5991	Address & Cleen RD.
(w 2814)		83860
The general type of business tran     (mark only those that apply)	sacted under the assumed b	usiness name is:
		ation and Public Utilities nsurance, and Real Estate
The name and address to which for correspondence should be address.		al): (208) 263-272/
Charlie Hillebrand 1507 Sagle Creen R.	) Assur	it Certificate of med Business
Sagle, ID, 83860	Ivame	e and <b>\$20.00</b> fee to: tary of State
<ol> <li>Name and address for this acknown copy is (if other than # 4 above).</li> </ol>	vledgment 700 W Basen PO Bo	Vest Jefferson ment West ox 83720
<u>Sam e</u>		ID 83720-0080 34-2301
		stary of State use only SECRETARY OF STATE
gnature: Chulu Multer	g the bil C	7/2006 09:00 T: 114126 BH: 369336
inted Name: Charlie Hillebrand		8 = 28.86 ASSUM NAME # 2
apacity:San L	Corpulormstabn p65	741418
(see instruction # 8 on back of form)	corpytor	J TI 110