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3 J 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. 25 1. The assumed business name which the undersigned use(s) in the transaction of business is: MR. POSTMAN 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are Name Address SETH T. HENDRY 616 BLUE LAKES BLVD. NO. TWIN FALLS, ID 83301 3. The general type of business transacted under the assumed business name is: RETAIL SALES & SERVICES See categories on the reverse 4. The name and address to which correspondence should be addressed: MR. POSTMAN 616 BLUE LAKES BLVD. NO. TWIN FALLS, ID 83391 Signed By Capacity PROPRIETOR Submit Certificate of Assumed Customer # Business name and \$20.00 fee to: Secretary of State use only Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080 IDAHO SECRETARY OF STATE CK: 2572 CT: 113982 BH: 286378 1 8 28.86 = 28.86 ASSUM NAME 1 2

CERTIFICATE OF ASSUMED BUSINESS NAME