

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:

APPLIANCE EXPRESS

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

SUNRISE DISTRIBUTORS, INC. 518 E. FIFTH AVE., POST FALLS, ID

3. The general type of business transacted under the assumed business name is:

RETAIL SALE OF APPLIANCES AND LIGHTING FIXTURES.

See categories on the reverse

4. The name and address to which correspondence should be addressed:

GARY BAKER, PRESIDENT

SUNRISE DISTRIBUTORS, INC.

518 E. FIFTH AVE.

POST FALLS, ID 83854

Signed Scott Rise, P.C.

By Scott Rise

Capacity Attorney for Sunrise Distributors, Inc.
Intermediary

Submit Certificate of Assumed
Business Name and \$20.00 fee to:

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

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 12/30/1996 0900 50614

CK #: 1122 CUST# 70359

ASSUM NAME
1@ 20.00= 20.00

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