Capacity/Title: Member

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned MAR 19 AH 8: 45 submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECULE ARY OF STATE STATE OF IDAHO

IDAHO SECRETARY OF STATE

03/19/2003 05:00

CK: 5073 CT: 158010 BH: 669565

1 8 20.00 = 20.00 ASSUM NAME # 2

1. The assumed business name which the undersion business is: #ELLS CANYON 25	gned use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name: Name KINGORE ADVENTURES UC W 17678	he entity or individual(s) doing
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: HELLS CONVON FINAL TRANS 4 LOOGING	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above): Jet Boat Hells Canyon River Tribs	Phone number (optional): 208 839 2255
4 L006 ING	Secretary of State use only
Signature: Leather Lellyars Printed Name: HENThen Killgore	D136168