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.

ME OF OCT SAMES SO 1. The assumed business name which the undersigned use(s) in the transaction of business is:

BECKER, JONES & GEORGE, A PARTNERSHIP

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

N?	m	e

Complete Address

MARTIN BECKER

P.O. BOX 2775 TWIN FALLS IDAHO 83301

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

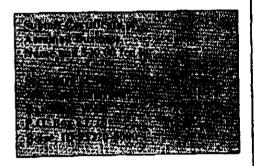
- ☐ Wholesale Trade
- Agriculture
- Finance, Insurance, Real Estate
- □ Construction □ Services
- Mining
- 4. The name and address to which future correspondence should be addressed:

MARTIN BECKER

P.O. BOX 2775

TWIN FALLS IDAHO 83301

5. Name and address for this acknowledgement copy is (if other than #4 above):



Signature: Martin Becker Printed Name: Martin Becker Capacity: Partney (See instruction #8 on back of form) Secretary of State use only