03/26/02

14:52



CERTIFICATE OF ASSUMED BUSINESS NAME

ISBDC STATE OFF

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

| NOTE: See instructions on reverse before filling | |
|--|--|
| The assumed business name which the undersigned business is: The Coarden Path | ed use(s) in the transaction of 3 4 9: |
| 2. The true name(s) and <u>business</u> address(es) of the elements under the assumed business name: Name The Gardin Path Rhonag Phillips | entity or individual(s) doing Complete Address 140 Washington Popate 110 Tolaho 83201 |
| 3. The general type of business transacted under the | assumed business name is: |
| Retail Trade (COME) Transportation and Put Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: The Carden Fath 4/0 Washington Auc. For atello, Id. 83201 | Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Bolse ID 83720-0080 208 334-2301 |
| Name and address for this acknowledgment copy is (if other than # 4 above). | Phone number (optional): 208-233-4004 |
| | Secretary of State use only |
| Signature: Shanda Phillips Printed Name: Bloods Phillips Capacity/Title: 0/0/1/8/ | N53822 |

IDAHO SECRETARY OF STATE

94/11/2002 95:00

CK: 681 CT: 158010 BH: 458496
1 8 20.00 = 20.00 ASSUM NAME # 2