



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

APR 30 AM 9:35
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

NORTHWEST INVESTMENT ALLIANCE CORPORATION

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

Name	Complete Address
<u>RAINRIDER REDLINES, INC.</u>	<u>1155 W. 4TH STREET, SUITE 214 RENO, NV 89503</u>
<u>C152884</u>	

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

- | | |
|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

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

NORTHWEST INVESTMENT ALLIANCE CORPORATION
6148 N. DISCOVERY WAY, SUITE 120
BOISE, ID 83713-0202

Submit Certificate of Assumed Business Name and \$25.00 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):

Phone number (optional):

(208) 887-7802

425-00

Secretary of State use only

Signature: _____

Printed Name: RAYMOND CHASE

Capacity/Title: SECRETARY/DIRECTOR

(see instruction # 8 on back of form)

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Printed: 04/30/03

IDAHO SECRETARY OF STATE
01/30/2004 05:00
CK: 756160 CT: 176138 BH: 724615
1 @ 25.00 = 25.00 ASSUM NAME # 4

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