

CERTIFICATE OF ASSUMED BUSINESS NAME

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

30 JTM -9 MHD: 09

STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the under business is: EasT Hills Develop	
Par Hinteleton	Complete Address P.O. Box C21 MTN. Home, Telaho 83647 1730 E.8 12N. MTN. Home, Telaho 83647
George 1. Hall 3. The general type of business transacted und	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson
Correspondence should be addressed: EnsT Hills Developmen T P.O. Box 621 % David E, Kno MTN. Home, Idaho 83647	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	nt Phone number (optional): 208-587-7789
SAME	Secretary of State use only
Signature:	IDANO SECRETARY OF STATE O1/09/2003 95 = 300 CK: CASH CT: 158818 BH: 655727 1 9 20.90 = 20.90 ASSUM NAME # 2