

CERTIFICATE OF ASSUMED BUSINESS NAME

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 filing.

Capacity: OWNEN NMAN QUENT, (see instruction # 8 on back of form)

FILED/EFFECTIVE

01 DEC 10 AM 10: 26

SECRETARY OF STATE STATE OF IDAHO

 The assumed business name which the undersigned use(s) in the transaction of business is: Beneficial Products + Senurces The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address 	
3. The general type of business transacted under the a	Benmulda DA. 152 Idulio 3209 Descripcioness name is:
Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	i .
4. The name and address to which future correspondence should be addressed: L419 Benmuda DA, 3046 JU,	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):
Signature: // Rry B. Stevens	Secretary of State use only

IDAHO SECRETARY OF STATE
12/10/2001 05:00
CK: 2052 CT: 154436 BH: 433607
1 0 20.00 = 20.00 ASSUM NAME # 2

D50319