Capacity:

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse:)-To the SECRETARY OF STATE, STATE OF IDAHO Nov 29 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: ARRODS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address NOVON 3. The general type of business transacted under the assumed business name is: Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real #state Services Construction Mining 4. The name and address to which future Phone number (optional): 208.442.56.76 correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 5. Name and address for this acknowledgment 700 West Jefferson **Basement West** CODY is (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 11/29/2000 09:08 Signature:/ CK: CASH CT: 139838 BH: 363425 Printed Name:

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