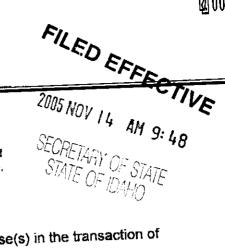
CERTIFICATE OF ASSUMED BUSINESS NAME

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.



The assumed business name which the undersigned use(s) in the transaction of business is: RISVOLD CONSULTING	
The true name(s) and business address(es) of business under the assumed business name:	the entity or individual(s) doing Complete Address 1015 W. IRONWOOD DRIVE, STE. 200 COEUR D'ALENE, ID 83814
3. The general type of business transacted unde Retail Trade Transportation at Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: MONTE H. RISVOLD 1015 W. IRONWOOD DRIVE, STE 200 COEUR D'ALENE, ID 83814 5. Name and address for this acknowledgmencopy is (if other than # 4 above):	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 Phone number (optional):
Signature:	Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 11/15/2005 05:00 CK: 3968 CT: 158010 BH: 921964 1 0 25.00 = 25.00 ASSUM NAME #