

Capacity/Title: MANAGER

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAMFILED EFFECTIVE Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

10 HAR 29 PM 4: 27

SECRETARY OF STATE 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: GEOGEM – USA			
The true name(s) and business address(es) of business under the assumed business name: Name	of the en	tity or individual(s) doing Complete Address	an Profession Transferrance
CRStuff LLC	995	East-Garfield	10 to
		WS FERRY , IdAHO	
	<u></u>	8362	23
Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: CR Stuff L.L.C.		Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	
ROBERT GIENN		(200) 001 200	
P.O. Box 993 GIENN'S FERRY 1 Ida HO 83423 5. Name and address for this acknowledgmen copy is (if other than #4 above):	t		
		Secretary of State use only	
ignature: Robert D. (etgnature required) rinted Name: ROBERT 3. GIENN	mslabn kormslabn p65 weed 04/2003	IDAHO SECRETARY OF 03/30/2010 CK: CASH CT: 158018 I	87ATE 05 : 00 84: 1215236