

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



To the SECRETARY OF STATE, STATE OF IDAHO
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name: STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

TRYAD SYSTEMS

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
<u>LAWSON DESIGN INC.</u>	<u>607 LINDENWOOD DRIVE,</u>
<u>C1286216</u>	<u>NAMPA, ID</u>
	<u>83686</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed:

LAWSON DESIGN INC.
607 LINDENWOOD DR.
NAMPA, ID 83686

5. Name and address for this acknowledgment copy is (if other than # 4 above):
Farmers & Merchants State Bank
112 2nd Street South
Nampa, Id 83651

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Farmers & Merchants State Bank
112 2nd Street South
Nampa, Id 83651

Signature: [Signature]

Printed Name: CHAD LAWSON

Capacity: VICE PRESIDENT
(see instruction # 8 on back of form)

Revision: 2/95

© 1995 Farmers & Merchants State Bank

Secretary of State use only
IDAHO SECRETARY OF STATE

08/31/2000 09:00
CK: 42191 CT: 135466 BH: 345466

1 @ 20.00 = 20.00 ASSUM NAME # 2

D3868