Capacity: OWNER

(see instruction # 8 or back of form)

IFICATE OF ASSUMED BUSINES (Please type or print legibly. See instructions on reverse, Property of STATE, STATE OF IDAHO

1 Idaho Code, the undersigned Property of State of Idaho Code, the undersigned Property of Idaho Code, the United SECRETARY OF STATE, STATE OF IDAHO
Pursuant to Section 53-504, Idaho Code, the undersigned Pusiness Name. 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: () VERCOMERS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name P.O. 16X 30BZ Robert CONSSIDENCE HAYDEN ID 83835 LES SMITH 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Mining Construction Services 4. The name and address to which future Phone number (optional): _____ correspondence should be addressed: Verconers Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Name and address for this acknowledgment Basement West PO Box 83720 CODY IS (if other than #4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only Signature: Printed Name: LES SmiTH IDANO SECRETARY OF STATE

12/20/2000 09:00 CK: 828 CT: 139874 BH: 367944

1 @ 20.00 = 20.00 ASSUM NAME # 5

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