Capacity: OWA

(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 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: KNSTRKSHN 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 2.25 STANDIFER, PLACERVILLE, IDA. GARY L. JONES 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 Phone number (optional) (208) 392-4966 4. The name and address to which future correspondence should be addressed: GARY L. JONES Submit Certificate of Assumed Business 225 STANDIFER Name and \$20.00 fee to: PLACERYILLE, IDA. 83666 Secretary of State 700 West Jefferson 5. 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 IDAHO SECRETARY OF STATE 02/12/1998 09:UØ CK: 2509 CT: 94177 BH: 81771 | Signature: 1 0 20.00 = 20.00 ASSUM NAME Printed Name: GARY ()12050