

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2007 AUG -6 PM 1: 41

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

| The assumed business name which the undersigned business is: | l use(s) in the transaction of |
|--|---|
| 2. The true name(s) and business address(es) of the e business under the assumed business name: Name Thomas Tokerson Watkin's 1624 Kuna | Complete Address |
| 3. The general type of business transacted under the a | ssumed business name is: |
| Retail Trade Transportation and Put Wholesale Trade Construction | olic Utilities |
| Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| 4. The name and address to which future correspondence should be addressed: | Secretary of State 700 West Jefferson Basement West PO Box 83720 |
| thomas Watkins PO Box 696 Donnelly ID. 83615 | Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgment | Phone number (optional): |
| COPY IS (if other than # 4 above): | (208) 447-8034 |
| | Secretary of State use only |
| Signature: Lomes Lable S Printed Name: Thomas J Watking Capacity/Title: Owner (see instruction # 8 on back of form) | IDAHO SECRETARY OF STATE 68/06/2007 65 202 CK: 181 CT: 158618 8H: 1869381 1 8 25.88 = 25.88 ASSUM NAME (|