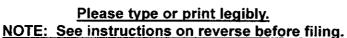


CERTIFICATE OF ASSUMED BUSINESS NAME

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





D 52244

1. The assumed business name which the und business is: INGELS Play ground	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name. Name Manuela Reyes	
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	der the assumed business name is: and Public Utilities 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
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	Phone number (optional): (208) 468-1092
Signature: <u>Manuela Reyes</u> Printed Name: <u>Manuela Reyes</u> Capacity/Title: Pres. Lent	Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE O2/15/2002 05:00 CK: 1886 CT: 148788 BH: 446655 1 2 20.00 = 20.00 ASSUM NAME # 2

(see instruction #8 on back of form)