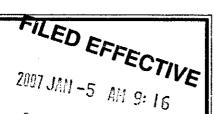
## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)



|  | or native   |
|--|---|
| The assumed business name which the undersigned business is:   | , ,   |
| APPS NORTHWE   | ST  |
| The true name(s) and business address(es) of the business under the assumed business name:     Name  | Complete Address  |
| FTK MANAGEMENT, INO. P.O. (C132599)  | 30x 72, SPIRIT LAKE, 1D<br>83869  |
| 3. The general type of business transacted under the   | assumed business name is:   |
| Retail Trade Transportation and Pu  Wholesale Trade Construction   | ıblic Utilities   |
| Services   | Submit Certificate of<br>Assumed Business<br>Name and \$25.00 fee to:     |
| <ol><li>The name and address to which future correspondence should be addressed:</li></ol>   | Secretary of State 700 West Jefferson                                     |
| FTK MANGGEMENT, INC.<br>P.O. BOX 73<br>SPIRIT LAKE, 1083869  | Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301               |
| <ol> <li>Name and address for this acknowledgment<br/>copy is (if other than # 4 above).</li> </ol>  | Phone number (optional):  |
|  | Secretary of State use only   |
| Signature: Denni D |   |
| Printed Name: Denw Dallar Reputed  | IDAHO SECRETARY OF STATE<br>@1/05/2007 @5:00                              |
| Capacity/Title: TRESIDENT  | CK: 93064902445 CT: 158010 BH: 162426<br>1 0 25.08 = 25.08 ASSUM NAME # 2 |