CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the usubmits for filing a certificate of Assumed Business	Indersigned ness Name.
Please type or print legibly. NOTE: See instructions on reverse before t	~ ~
The assumed business name which the under business is: ROCK CREEK JOI	
2. The true name(s) and business address(es) of business under the assumed business name: Name R.K.T., CO. LP 2188 TFH LP 2300 SHOROCK HYDRO, INC.	Complete Address P.O. BOX 1787, TWIN FALLS, ID 83303 P.O. BOX 1787, TWIN FALLS, ID 83303 P.O. BOX 1787, TWIN FALLS, ID 83303
Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future	er 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
correspondence should be addressed: JOHN J. STRAUBHAR P.O. BOX 1787 TWIN FALLS, ID 83303	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than # 4 above): 	11
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE ### ### ############################