Printed Name:

(see instruction # 8 on back of form)

Capacity:

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) 3 47 PH '97 To the SECRETARY OF STATE, STATE OF IDAHO INC. 1 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business, Name APY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: 2. The true name(s) and business address(es) of the entity or individual(s) deing business under the assumed business name is/are: 9 Complete Address Boise IO 837,02 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 Wholesale Trade Agriculture Mining Construction Services Phone number (optional): 820-539/ 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: 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 INMO SECRETARY OF STATE 08/08/1997 09:00 CK: CRSH CT: 85477 BH: 28148 Signature: 1 0 20.00 = 20.00 ASSUM MANE

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