

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.

2006 OCT 20 AM 9: 08

SECRETARY OF STATE STATE OF IDAHO

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| DOUBLE L 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: | |
|--|---|
| | |
| APACHE RIVER, LLC | 2698 LAKEVIEW RD |
| | P O BOX 597 |
| (J52035 | AMERICAN FALLS, ID 83211 |
| 3. The general type of business transacted un Retail Trade Transportation | der the assumed business name is: and Public Utilities |
| Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☑ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: CHRIS HUNSAKER | Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 |
| P O BOX 597 | 208 334-2301 |
| AMERICAN FALLS, ID 83211 5. Name and address for this acknowledgme copy is (if other than # 4 above): | Phone number (optional): 208-226-5592 ext 103 |
| | Secretary of State use only |
| gnature: (signature required) | IDAHO SECRETARY OF STATE 10/20/2006 05 = 00 CK: 7761 CT: 139759 BH: 981284 1 9 25.88 |
| | 19 9 18/20/2006 83#88 |
| rinted Name: CHRIS HUNSAKER | 10/20/2006 VIIIO |