

CERTIFICATE OF ASSUMED BUSINESS NAME

David B. Hennessy

Member, Hennessy Two, L.L.C.

(see instruction #8 on back of form)

Printed Name:

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the under submits for filing a certificate of Assumed Business	ersigned
Please type or print legibly. NOTE: See instructions on reverse before filir	ng.
 The assumed business name which the undersign business is: 	gned use(s) in the transaction of
Hennessy Com	pany
The true name(s) and <u>business</u> address(es) of the business under the assumed business name: <u>Name</u> Hennessy Two, L.L.C.	e entity or individual(s) doing <u>Complete Address</u> 200 River St. West
W 206 93	Suite 202
	Ketchum, ID. 83340
 Retail Trade Wholesale Trade Construction Services Manufacturing Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: Mr. David B. Hennessy P.O. Box 5425 Ketchum, ID 83340	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above): Lee Ritzau	Phone number (optional):
P.O. Box 2400	Secretary of State use only
Ketchum, ID 83340 nature: (signature required)	• · · · · · · · · · · · · · · · · · · ·
(signature required)	IDAHO SECRETARY OF STATE

09/11/2002 05:00 CK: 2884 CT: 163419 BH: 487514 1 8 28.88 = 28.88 ASSUM NAME # 2 D 58165