CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: 4 Seasons: Repair and Maintenance 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address Eddie W. Williams 1346 8th Ave. Twin Falls, ID Stanley Versnick III . 1338 8th Ave E. Twin Falls, In 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction-Mining 4. The name and address to which future correspondence should be addressed: Submit Certificate of 1346 8th Ave. E Assumed Business Name and \$20.00 fee to: Twin Falls, ID 83301 Secretary of State 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 CODY is (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAMO SECKETANY OF STATE 04/17/1998 09:00 DK: 1234 CT: 97477 BH: 182137 Signature: Adduction 1 0 20.90 = 20.00 ASSUM HAME Printed Name: Eddie W. Williams Capacity: General Partner D 14099

(see instruction # 8 on back of form)