CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2006 MAR -8 PM 1: 24

STATE OF HOAHO

Please type or print legibly.

OTE: See instructions on reverse before filing.

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) doing business under the assumed business name: Name Complete Address Corey J. Elecan Complete Address Corey J. Elecan Complete Address Complete	
business under the assumed business name: Name Complete Address	
The general type of business transacted under the assumed business name is: Retail Trade	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Secretary of State 700 West Jefferson Basement West PO Box 83720 P. D. Box L Shelley, ID 83274	-
Correspondence should be addressed: The for Insurance Services P.D. Box L Shelley, ID 83274 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
5. Name and address for this acknowledgment Phone number (optional):	
copy is (if other than #4 above): 208-226-4290	
Secretary of Stats use only	
ted Name:	3c)
(see instruction # 8 on back of form) IDAHO SECRETARY 03/08/2006	

IDAHO SECRETARY OF STATE

03/08/2006 05:00

CK: 746001 CT: 172099 BH: 942038
1 8 25.00 = 25.00 ASSUM NAME # 2