



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 APR 15 PM 2: 09

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Idaho Title & Trust Company

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Idaho Title & Trust, Inc.

Complete Address

400 Memorial Drive

Idaho Falls, ID 83402

C146101

3. The general type of business transacted under the assumed business name is:

- | | |
|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Idaho Title & Trust, Inc.

P.O. Box 50367

Idaho Falls, ID 83405

5. Name and address for this acknowledgment copy is (if other than # 4 above):

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
208 334-2301

Phone number (optional):

(208) 522-7895

Secretary of State use only

Signature: _____

Gilman J. Gardner
(signature required)

Printed Name: _____

Gilman J. Gardner

Capacity/Title: _____

President

(see instruction # 8 on back of form)

9 Corp/ump/vol form abri 255
Revised 04/2003

075397

IDAHO SECRETARY OF STATE
04/15/2004 05:00
CK: 6067 CT: 25545 BN: 739544
1 @ 25.00 = 25.00 ASSUM NAME # 2