CERTIFICATE OF ASSUMED BUSINESS NAME (See Instructions on reverse.) 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 Ark 1. The assumed business name which the undersigned use(s) in the transaction of business is: BENEFITS Advisory Mroup 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name Thomas H Carlyle 3965 Hendersont Pocate 110 Id 83201 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 Phone number (optional): correspondence should be addressed: BENEFITS Advisory Group Submit Certificate of Assumed Business 3965 Henderson Ln. Name and \$20.00 fee to: POCATELIO Td 83201 Secretary of State 700 West Jefferson Name and address for this acknowledgment **Basement West** CODV IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only

IDAHO SECRETARY OF STATE

05/19/2000 09:00 CK: 1868 CT: 131318 BH: 319435

28.88 = 28.88 ASSUM NAME # 2

735961

Signature: Thomas H. Jax Printed Name: Thomas H. Carly

Capacity: Owner

(see instruction # 8 on back of form)