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.	
The assumed business name which the undersigned use(s) in the transaction of business is:	
The Golfer's Edge	
 The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: 	
Name Dole Dimensions, Inc.	Complete Address 2091 Meadow Street, Idaho Falls, ID 83401
(C 128128)	
3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade	
correspondence should be addressed: Todd R. Dole	Submit Certificate of Assumed Business Name and \$20.00 fee to:
2091 Meadow Street Idaho Falls, ID 83401	Secretary of State 700 West Jefferson
5. Name and address for this acknowledge copy is (if other than # 4 above). Brian T. Tucker, Esq.	Basement West
P. O. Box 51630	Secretary of State and Only

Idaho Falls, ID 83405

Signature: jostd

Printed Name: Todd R. Dole

Capacity: Vice President

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

04/05/1999 09:00 CK: 28782 CT: 2834 MH: 283899

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