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. | |
|--|--|
| business is: | SECRETARY OF STATE ich the undersigned Gše(s) in the transaction of |
| Fort Hazel Magic | |
| business under the assumed busi Name | ddress(es) of the entity or individual(s) doing iness name is/are: Complete Address Hoo Hill Ad. Boise 83702 |
| The general type of business trans(mark only those that apply) | sacted under the assumed business name is: |
| Wholesale Trade Agric | struction Mining |
| The name and address to which for correspondence should be address. Fort Hazel Magic | Submit Certificate of |
| P.O. Box 1192 | Assumed Business Name and \$20.00 fee to: |
| BoiseID 83701 | Secretary of State 700 West Jefferson |
| 5. Name and address for this acknow copy is (if other than # 4 above). | Wiedgment Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| | Secretary of State use only |
| nature: M. Tirka Ant | DATE 02/28/1997 DOING SECRETARY OF STATE DATE 02/28/1997 O900 68324 2 CK #: 5649 CUST# 77359 |
| nted Name: M. Tristan Andreas | |
| pacity: fresident (see instruction # 8 on back of form) | |