Capacity/Title: Partner

(see instruction # 8 on back of form)

## FILED EFFECTIVE **CERTIFICATE OF**

ASSUMED BUSINESS NAMES FEB -7 AT 10: 06 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name (LIAR) STATE OF IDAHO

<ol><li>The true name(s) and business address(es) business under the assumed business name</li></ol>	) of the entity or individual(s) doing	į
	ie:	
Name	Complete Address	
Christopher Michael Richards	330 Colurado Street Gooding,	ICO 833
Kurt Maxwell	330 Colorado Street	-1
Jeremy Hurd	330 Colorado Street	\ \ \ \
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  The name and address to which future correspondence should be addressed:  Christopher Michael Richards  330 Colorado St. Gooding, TE  83330	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	
<ol> <li>Name and address for this acknowledgmen copy is (if other than # 4 above).</li> </ol>	nt Phone number (optional):	
	Secretary of State use only	

IDAHO SECRETARY OF STATE 92/07/2005 05:00 CX: 4146 CT: 158010 BH: 791461 1 8 25.00 = 25.00 ASSUM HAME # 2