CERTIFICATE OF ASSUMED BUSINESS NAME

| 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 unduliness is: Description | dersigned use(s) in the transaction of |
| 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: | |
| <u>Name</u> | <u>Address</u> |
| | 355 Lixola Suite#6-Jerone ID 3338 |
| - Torriet Part 39 | 35 S. Lincoln Suite # 6: Jeune ID 838 |
| 3. The general type of business transacted under the assumed business name is: See categories on the reverse | |
| 4. The name and address to which correspondence should be addressed: US Cond. Toloro PO DOX 138 John D Day | |
| Capacity President | |
| Submit Certificate of Assumed Business Name and \$20.00 fee to: | Customer # Secretary of State use only |
| Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080 | 19000 SECRETARY OF STATE 07/30/1997 09:00 CK: 942020905 CT: 18915 Mil 25650 CK: 942020905 CT: 18915 Mil 25650 |
| Doise ID 031 20-0000 | 1 0 20.00 = 20.00 ASSUM HAVE 0 6791 |