Printed Name: /

Capacity:

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAMELE (Please type or print legibly. See instructions on reverse.) Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business N 1. The assumed business name which the undersigned use(s) in the transaction of business is: 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 P.O. BOX 774, SUN VALLE 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Retail Trade Manufacturing Finance, Insurance, and Real Estate Wholesale Trade Agriculture Construction Mining Services Phone number (optional): 208/622-3173 4. The name and address to which future correspondence should be addressed: SSOURCE. Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAMO SECRETARY OF STATE 09/03/1998 09:06 CK: 4 CT: 103573 BH: 142207 Signature: 1 8 20.00 = 20.00 ASSUM HAME