Capacity: (SENERAL

(see instruction # 8 on back of form)

IFICATE OF ASSUMED BUSING OF THE OF IDAMO 2 11 CERTIFICATE OF ASSUMED BUSINESS NAME To the SECRETARY OF STATE, STATE OF IDAMO 2 Pursuant to Section 53-504, Idaho Code, the undersigned in gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: C.R.F. 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 Name ANGELO R. REA 8805 W. WESTBROOK DR. BOISE 10 83704 STACEY W. CLAUS 409 DRIFTWOOD RO., BOIST 10 83703 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Minina 371 9749 4. The name and address to which future Phone number (optional): ___ correspondence should be addressed: STACEY W. CLAUS Submit Certificate of Assumed Business 409 DriFTWOOD RD. Name and \$20.00 fee to: Soise 10 83703 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above): PO Box 83720 // Boise ID 83720/0080 208 334-2301 IDANU SECRETARY OF STATE Secretary of State use only 03/02/2000 09:00 CK: CASH CT: 127569 BH: 295301 1 @ 20.00 = 20.00 ASSUM MAME # 2 Signature: Printed Name:

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