CERTIFICATE OF ASSUMED BUSINESS NAME

| To | the SECRE | TARY | OF | STATE, | STA | NTE | OF | ID/ | AHO |
|----|-----------|------|----|--------|-----|------------|----|-----|------------|
| | | | | | | | _ | - | - 4 |

Pursuant to Section 53-504, Idaho Code, the undersigned 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:

FRONTIER ALVARD CENTER

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

<u>Address</u>

MICHAEL J. WILLIAMS 2250 MOUNTAIN VIEW PD

ELIZKBETH ANNE WILLIAMS SANOPOINT, ID. 83864

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:

FRONTIER AWARD CENTER

22 50 MOUNTAIN VIEW RD

SANDPOINT, ID 83864/10

Signed _

Siever Sticket

Capacity OWNERS

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080 Customer#

Secretary of State use only

IDONO SECRETARY OF STATE DATE 04/01/1997 CK #: NO CK # CUST# 79074 ASSUM NAME 18 20.00= 20.00