227 CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO or Pursuant to Section 53-504, Idaho Code, the undersigned Am II: 53 gives notice of adoption of an Assumed Busiges Name. 1. The assumed business name which the undersigned use(s) in iter tra business is: JUINERS 1AMONT 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 Simbrell 703 A.H. NART nrel 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing **Retail Trade** Finance, Insurance, and Real Estate Agriculture Wholesale Trade Mining Construction Services Sacr' Phone number (optional): 4. The name and address to which future correspondence should be addressed: Amont Submit Certificate of Assumed Business Name and \$20.00 fee to: 23714 Secretary of State (LARDER 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only **IDANO SECRETARY OF STATE** 08/02/1999 09:00 CK: 1748 CT: 190609 DH: 238624 Signature: 1 8 28.88 = 28.88 ASSUM NAME # 2 Printed Name: ğ D2809() corpiformstabn Capacity: CINNE (see instruction # 8 on back of form)