

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2003 FEB 14 AM 8: 55

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

STATE OF IDAHO

| Stephar | n, Kvanvig, Stone & Trainor |
|--|--|
| The true name(s) and business add business under the assumed busines Name Kevin F. Trainor Laird B. Stone Russell G. Kvanvig | ress(es) of the entity or individual(s) doing ess name: Complete Address 3677 North 2600 East, Twin Falls, ID 83301 275 Lincoln Street, Twin Falls, ID 83301 1753 Bitterroot, Twin Falls, ID 83301 |
| Retail Trade Transp | ortation and Public Utilities |
| Wholesale Trade ☐ Constitution✓ Services ☐ Agricution☐ Manufacturing ☐ Mining☐ Finance, Insurance, and Real | Assumed Business Name and \$20.00 fee to: |
| 4. The name and address to which fut correspondence should be address. Stephan, Kvanvig, Stone & Trainor P.O. Box 83 Twin Falls, ID 83303-0083 | 700344 1 1 26 |
| 5. Name and address for this acknow copy is (if other than # 4 above): | viedgment Phone number (optional): 208-733-2721 |
| | Secretary of State use only |
| rinted Name: General Partner | # Part. 2002/00 postupe IDAHO SECRETARY OF STATE 1321 CT: 4894 RH: 662 |

IDAHO SECRETARY OF STATE 22/14/2003 05:00 CK: 1321 CT: 4894 BH: 663022 1 0 20.00 = 20.00 ASSUM NAME # 2

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