Capacity:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS N (Please type or print legibly. See instructions on reverse.) Jun 3 10 28 AM *98 To the SECRETARY OF STATE, STATE OF IDAHO 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: DESIGN MORTGAGE 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 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 Wholesale Trade Agriculture Mining Services Construction 4. The name and address to which future Phone number (optional): ____ correspondence should be addressed: FRANKUN RD 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 CODV IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Signature: Printed Name: D15508