TFICATE OF ASSUMED BUSINESS.

(Please type or print legibly. See instructions on peverse. CERTIFICATE OF ASSUMED BUSINESS 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 trace business is: Clearwater Tackle 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 Robert BUTT 3. The general type of business transacted under the assumed business name is: Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Idaho, 83544 Secretary of State 5. Name and address for this acknowledgment 700 West Jefferson COpy is (If other than # 4 above): **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

04/24/2001 09:00 CK: 3643 CT: 145436 BH: 392966

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: Robert Bohn Printed Name: Robert Bohn

Capacity: Owner

(see instruction # 8 on back of form)