CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

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

(see instruction # 8 on back of form)

2087267879

2004 SEP 24 AM 10: 17 STATE OF IDAHO

| 1. The assumed business name which the undersigned use(s) in the transaction of | |
|--|--|
| business is: | |
| Sun Valley Equi | ties |
| 2. The true name(s) and business address(es) of the entity or individual(s) doing | |
| | |
| 0.0 | · Box 3801 |
| Mind of the Vo | to how 1D 83340 |
| | 100m, 10 63310 |
| | |
| 3. The general type of business transacted under the | assumed business name is: |
| Retail Trade Transportation and Public Utilities | |
| | |
| | |
| ☐ Manufacturing ☐ Mining | Submit Certificate of Assumed Business |
| | Name and \$25.00 fee to: |
| Finance, Insurance, and Real Estate | On water of Otate |
| The name and address to which future correspondence should be addressed: | Secretary of State 700 West Jefferson |
| 0.1 0 0 | Basement West |
| Htres R. La Veter | PO Box 83720 Boise ID 83720-0080 |
| 8.0, Box 3801 | 208 334-2301 |
| <u>ketchow</u> 10 83340 | |
| 5. Name and address for this acknowledgment | Phone number (optional): |
| COPY IS (if other than # 4 above): | 238-7267-806 |
| | |
| | Secretary of State use only |
| | |
| my of the | |
| nature: (signature required) | |
| inature: (algorithme required) Inted Name: Alfred R. La Peter Inpacity/Title: Occured | |
| pacity/Title: Owner by | |
| padity/ fide | |

IDANO SECRETARY OF STATE
69/24/2004 05:00
CK: 7453 CT: 158018 BH: 767795
1 0 25.00 = 25.00 ASSUM NAME # 2

