FICATE OF ASSUMED BUSINESS INC. (Please type or print legibly. See instructions on reverse.) TARY OF STATE, STATE OF IDAHO Rusiness Name. Tansaction of CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned? All 9:09 To the SECRETARY OF STATE, STATE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: <u>Campbell Singletree Ranch</u> 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 3843 Campbell Road, New Meadows, ID 83654 Donna Campbell 3. The general type of business transacted under the assumed business name is: (mark only those that apply) 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): (208) 347-2244 correspondence should be addressed: Campbell Singletree Ranch Submit Certificate of Assumed Büsiness 3843 Campbell Road Name and \$20.00 fee to: New Meadows. ID 83654 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above). PO Box 83720-/ Boise ID 83720 0080 208 334-2301 IDANG RESPETABLE GEATERLY 03/02/2000 09:00 CK: 2254 CT: 127549 BH: 295230

Signature:

Printed Name: Donna Campbell

Capacity: Owner_

(see instruction # 8 on back of form)

1 @ 20.00 = 28.00 ASSUM NAME # 2

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