

CERTIFICATE OF ASSUMED BUSINESS NAME

(see instruction #8 on back of form)

| | FILED EFFECTIVE |
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| CERTIFICATE OF ASSUMED BUSINESS N. Pursuant to Section 53-504, Idaho Code, the un submits for filing a certificate of Assumed Busine | dersigned "////), |
| Please type or print legibly. NOTE: See instructions on reverse before file. 1. The assumed business name which the unders business is: 2. The true name(s) and business address(es) of | igned use(s) in the transaction of |
| business under the assumed business name: Name Name Name 3. The general type of business transacted under | Complete Address 17199 him ock ho. Hayala, T.D. the assumed business name is: |
| Retail Trade Transportation an Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | <u> </u> |
| 4. The name and address to which future correspondence should be addressed: 1199 himself by the correspondence should be addressed: | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgment copy is (if other than #4 above): | Phone number (optional): 10-810 Secretary of State use only |
| Signature: ASPER NAUMANN Capacity/Title: OWNER | IDAHO SECRETARY OF STATE 03/16/2004 05 = 00 CK: 4986 CT: 158818 BH: 733367 1 9 25.00 = 25.00 ASSUM NAME # 2 |