CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO_{10 JUL} -7 AM 8: 35 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. UF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: Wayne & Diane McCarroll dba Lighted House Numbers 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 Wayne McCarroll 1014 Syringa Road, Post Falls, Id 83854 1014 Syringa Road, Post Falls, Id 83854 Diane McCarroll 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 Phone number (optional): (208) 773-7750 4. The name and address to which future correspondence should be addressed: 1014 Syringa Road Submit Certificate of **Assumed Business** Post Falls, Idaho 83854-9020 Name and \$20.00 fee to: Secretary of State 700 West Jefferson 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 Secretary of State use only IDAHO SECRETARY OF STATE 07/07/2000 09:00 CK: 11574 CT: 133243 BH: 331787 Signature: _________ 1 # 20.00 = 20.00 ASSUM NAME # 2

Printed Name: Wayne McCarroll

Capacity: President

(see instruction # 8 on back of form)