CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned OCT 12 AM 8: 51 gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) iவிங்க மகாத்குற்கா of business is: 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 PSIGN, INC. PMB173, 2900 Government Way Courd'Alone ID. 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Construction Mining Services 4. The name and address to which future Phone number (optional): 208-765-9599 correspondence should be addressed: Ine Inclines Submit Certificate of Assumed Business PMB 173, 2900 GOUT. Way Name and \$20.00 fee to: Coeur d'Alene ID. 83815 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 10/12/2000 09:00 CX: 3311 CT: 137119 BH: 354665

Signature: Printed Name: Kebekah J. Ghruin

Capacity: Owner (CEO

(see instruction # 8 on back of form)

1 9 29.90 = 28.00 ASSUM NAME # 2

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