



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 AUG 25 AM 9:13

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Martin & Ray

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Robert L. Martin

4931 North 125 West

Idaho Falls, ID 83402

William D. Ray

4022 North 125 West

Idaho Falls, ID 83402

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input checked="" type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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):

Zions First National Bank

1235 South Utah Avenue

Idaho Falls, Idaho 83402

Martin & Ray

Signature: By: Robert L. Martin

(signature required)

Printed Name: Robert L. Martin

Capacity/Title: _____

By: William D. Ray

(see instruction # 8 on back of form)

Phone number (optional): _____

Secretary of State use only

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Revised 04/2003

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IDAHO SECRETARY OF STATE
08/25/2004 05:00
CK: none CT: 112633 BH: 762763
1 @ 25.00 = 25.00 ASSUM NAME # 2