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 gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction business is: Aspen Design Group 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address Phillip A MacLachlan 1726 Mannelle Way Sandpoint, Idaho 83864 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): _____ correspondence should be addressed: 206 N 4th Ave #204 Submit Certificate of Assumed Business Sandpoint, Idaho 83864 Name and \$20:00 fee to: 25, -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 same as 4 Boise ID 83720-0080

208 334-2301

Secretary of State use only

Signature:__ Phillip A MacLachlan Printed Name:

(see instruction # 8 on back of form)

Capacity:

IDAHO SECRETARY OF STATE 5/2003 05:00 CT: 158810 BH: 680767 25.00 ASSUM NAME # 2

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