10 MH 9: 14

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

Please type or print legibly.
NOTE: See instructions on reverse before filing.

Criterion Assurance (The true name(s) and business address(es) of the	
business under the assumed business name: Name Young & Associates, Inc.	Complete Address 450 B Street Suite 2
C 107289	Idaho Falls, ID 83402
3. The general type of business transacted under the Retail Trade Transportation and	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State
The name and address to which future correspondence should be addressed: Criterion Assurance Co. 450 B Street Suite 2	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
Idaho Falls, ID 83402	208 334-2301 Phone number (optional):
 Name and address for this acknowledgment copy is (if other than #4 above): Young & Associates, Inc. 	208-523-7900
Attn: Mark S. Young 450 B Street, Idaho Falls, ID 83402	Secretary of State use only
nted Name: Mark S. Ourng pacity/Title: President	IDAHO SECRETARY OF STATE 10/18/2004 05:0