CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) To the SECRETARY OF STATE OF IDAHO Pursuant to Section 53-504 Maho Code, the undersigned of six gives notice of addition of an Assumed Business Name ARY OF STATE gives notice of addition of a Assumed Business Name RY OF STATE STATE OF ST business is: 300 Rocks 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 C.D.A.ID 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Retail Trade Manufacturing X Wholesale Trade Agriculture Finance, Insurance, and Real Estate Construction Mining Services 4. The name and address to which future correspondence should be addressed: Submit Certificate of PAUL I VANOFF Assumed Business P.O. BOX 5402 - C.D. A. ID Name and \$20.00 fee to: 83814-1955 Secretary of State 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 IVANOFF PAUL 208 334-2301 HARRISON AVE TORSIO CONCENTAR STATE STATE ONly 09/08/1997 09:00 CK: 67127680923 CT: 86870 BH: 36450

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Signature: Faul Wans

Printed Name: PAUL IVANOFF

Capacity: OWN ER

(see instruction # 8 on back of form)