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 (24)	
The assumed business name which business is:	the undersigned use(s) in the transaction of
BENCHMARK HOM	<u>E5</u>
The true name(s) and business add business under the assumed busine	ress(es) of the entity or individual(s) doing
<u>Name</u>	Complete Address
DAVID K. PINKERTON	P.O. BOX 1723 BONNERS FERRY TO. 83865
The general type of business transacted under the assumed business name is: (mark only those that apply)	
Wholesale Trade Agricu	Transportation and Public Utilities Ilture Finance, Insurance, and Real Estate Fuction Mining
 The name and address to which future correspondence should be address. 	· · · · · · · · · · · · · · · · · · ·
SAME AS ABOVE	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowle copy is (if other than # 4 above): Same as above	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only 100HO SECRETARY OF STATE
0 0	
Signature: Navil K. Finkerton	CK: NO CK # CT: 130439 BH: 313899
Printed Name: <u>DAVID K. PINKERTON</u>	D 35423
Capacity: <u>OWNER / MANAGER</u>	D 35423

(see instruction # 8 on back of form)