

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 790 FTD -2 MI 9: 30

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

| 1. The assumed business name which the under business is: | Resigned use(s) in the transaction of |
|---|--|
| The true name(s) and business address(es) or business under the assumed business name: Name Dean P, Ma Hsberger | Complete Address 923 So Fir Terome ID 83338 3262 E 37001U Kimbary FD 93341 |
| Retail Trade Transportation an Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 3262 9 3700 N Kimberly TD. 83341 | |
| 5. Name and address for this acknowledgment copy is (if other than #4 above): 923 So Fire Terrome ID 83378-2903 | Phone number (optional): 1-208-471-0477 Secretary of State use only |
| Signature: Name: Dean P. Waltsberger Capacity/Title: Partner (see instruction # 8 on back of form) | IDAHO SECRETARY OF STATE 02/02/2004 05:00 CK: 1224 CT: 176202 BH: 725039 1 0 25.00 = 25.00 ASSUM MANE # 2 |

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