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 of business is: Great Rift Partnership 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 Name P.O. Box 360, American Falls, ID. 8341 Lance Funk Monty Funk Diane Funk 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 Finance, Insurance, and Real Estate Wholesale Trade xx Agriculture Services Construction Minina 4. The name and address to which future Phone number (optional): _____ correspondence should be addressed: Submit Certificate of Assumed Business P.O. 480x 360 Name and \$20.00 fee to: American Falls, ID. 83211 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 Boise ID 83720-0080 Western Bank 208 334-2301 1110 Call Creek Dr., Suite #7 Secretary of State use only IDAHO SECRETARY OF STATE Pocatello, Idaho 83201 08/30/1999 09**:**00 CK: 986581623 CT: 97112 BH: 245726

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