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 UL -6 AM 10: \$ 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: WIZARD Kraft 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 William H. Wers 142 (Saint Maries 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 Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): ____ correspondence should be addressed: William H. West Submit Certificate of Assumed Business Name and \$20.00 fee to: 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 BANK OF AMERICA 208 334-2301 APPLEWAY PRANCH #96503 W. 501 Appleway Coeur d'Alene, ID 83814

Secretary of State use only

IDAHO SECRETARY OF STATE

07/06/1999 09:00 CX: 3758188975 CT: 117639 MH: 231435

1 0 20.00 = 20.00 ASSUM NAME #

Signature: Mille Printed Name: William H. 1. br

(208) 667-3537

Capacity: Owner

(see instruction # 8 on back of form)