CERTIFICATE OF ASSUMED BUSINESS NAME. (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO 1 09 PM '99 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 grams action to form the strams action to form the strans action to form the strams action to form the strans action to form the strans action to form the strans business is: RECOVERY OVERCHARG CONSULTANT 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 LESTIE HILL 414 W. 2Nd ST. 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 Phone number (optional). (268) 365-2102 4. The name and address to which future correspondence should be addressed: LESLIE HILL Submit Certificate of Assumed Business 414 W. 2nd ST. Name and \$20.00 fee to: EMMETT, Id. 83617 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 208 334-2301 TARGETERS ET STATE USE ATELY **09/20/1999 09:00** CK: CASH CT: 120726 BH: 251321 Signature: Leslie Hill 1 8 28.08 = 28.08 ASSUM WAME # 2 Printed Name: LESTE H; 11

Capacity: CansulTANI

(see instruction # 8 on back of form)