## TFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reversibly APR Code, the undersigned AFR Code, the undersigned AFR Code State OF OF STATE OF STATE OF OF STATE OF OF STATE OF CERTIFICATE OF ASSUMED BUSINESS N To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned Pursuant to Section 53-504, Idaho Code, the undersigned Pursuant Rusiness Name gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction business is: Macmillan Racino 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 230 East 14th North Wesley Kevin Macmillan Mountain Home Idaho 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Retail Trade Manufacturing Finance, Insurance, and Real Estate Wholesale Trade Agriculture Services Construction Mining (Performance) 4. The name and address to which future Phone number (optional): (28)587-0785 correspondence should be addressed: 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 208 334-2301 Secretary of State use only THAND SECRETARY OF STATE 184/84/2000 09:00 CK: 1854 CT: 129297 BH: 385649 Signature: 1 8 28.86 = 29.86 ASSUM MANE # 2 Capacity: ( 34707

(See instruction # 6 on DSCK of form)