CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO



Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Businesson and USAN STATE OF STATE OF IDAHO	
1. The assumed business name which the ubusiness is:	indersigned use(s) in the transaction of
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
James A. Foster	Complete Address 410 Cedar
	Potlatch, ID 83855
The general type of business transacted under the assumed business name is: (mark only those that apply)	
☐ Retail Trade ☐ Manufacturi☐ Wholesale Trade ☐ Agriculture☐ Services ☐ Construction☐	Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed: P.O.B. 172 Po+latch, ID 83855	Assumed Business
5. Name and address for this acknowledgm copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West
:	Sacretary of State use only

Signature:__

Printed Name: James A. Foster

Capacity: President and Senior Scientist

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

01/07/1998 09:00 CK: 1495 CT: 92174 BH: 78489

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