CERTIFICATE OF ASSUMED BUSINESS NAME

2006 AUG 14 PM 4: 34

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF TOWNS

FILED EFFECTORE

Please type or print legibly. NOTE: See instructions on reverse before filing.

business is: TRIDENT MANAGEI	MENT SE	ERVICES
2. The true name(s) and business address(es) of business under the assumed business name: Name TRUSTEE SERVICES, INC.		ntity or individual(s) doing Complete Address E. Parkcenter, #311, Boise, ID 83706
3. The general type of business transacted und	er the a	ssumed business name is:
Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Trident Management Services 967 E. Parkcenter Blvd., #311 Boise, Idaho 83706 5. Name and address for this acknowledgment copy is (if other than #4 above):		Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
		Secretary of State use only
ignature Culocus (signature required) rinted Name: M. Dressen apacity/Title: Pres., Trustee Services, Inc. (see instruction #8 on back of form)	g koopkometabn formstabn p65 Revised 04/2003	IDAHO SECRETARY OF STATE OB/15/2006 05:6 CK: 885949 CT: 172099 BH: 97