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 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: STATE UF IDAHO RETREADS-Trails Work 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 G. LIDRIGHT WRIGHT 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 Construction Mining Services The name and address to which future Phone number (optional): correspondence should be addressed: lexuno G WELGHT Submit Certificate of ... Assumed Business Name and \$20.00 fee to: KOOSKIA IDAHO83539 Secretary of State 700 West Jefferson Name and address for this acknowledgment Basement West PO Box 83720 CODY 18 (If other than # 4 above); Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 04/14/1999 09:00 CX: 219 CT: 114668 BH: 207089 1 8 20.00 = 20.00 ASSUM NAME # 2 D25038 Capacity: DayThee (see instruction # 8 on back of form)