CERTIFICATE OF ASSUM (Please type or print legibly. Se	IED BUSINESS NAME e instructions on reverse.)
To the SECRETARY OF STATE, STATI Pursuant to Section 53-504, Idah gives notice of adoption of an Ass	o Code, the undersigned
The assumed business name which the und business is:      EXPRGSS WINCLE	lersigned use(s) in the transaction of 0
2. The true name(s) and business address(es) business under the assumed business name	
PREMIER GROUP INC	MENIOIANIO 83642
C 126505	1/16/10/10/10 83645
The general type of business transacted und (mark only those that apply)	der the assumed business name is:
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining
correspondence should be addressed:	none number (optional): 208-941-2774
MOSIOIAN ID 836/2	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	I <b>SHO SECRETARIS UNITE</b> 8 07/18/2000 09:00
Signature:	07/18/2000 09:00 CK: 5260 CT: 133667 BH: 334300 1 0 20.00 = 20.00 ASSUM NAME # 2
Printed Name: Touhins Campsoli JR	SQ 27508
Canacity: Alar Pars	<b>*                                   </b>

(see instruction # 8 on back of form)