CERTIFICATE OF ASSUMED BUSINESS NAMES CTI (Please type or print legibly. See instructions on reverse.) TRANSMITTENE OF IDAHO 00 APR 28 AM 9: 20 Pursuant to Section 53-504, Idaho Code, the undersigned STATE OF JOAN 1. The assumed business name which the undersigned use(s) in the transaction of business is: AND NIME 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address Markotte T. La Deste 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining Phone number (optional): 208-437-3230 4. The name and address to which future 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 IDAHO SECRETARY OF STATE 06/27/2000 09:**00** CK: 3228 CT: 132917 BH: 329553 Signature:_ 28.66 = 28.88 ASSUM MANE # 2 **Printed Name:** 36913 Capacity:

(see instruction # 8 on back of form)