CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO 98 HAR -6 HI 9: 25 Pursuant to Section 53-504, Idaho Code, the undersigned of STATE gives notice of adoption of an Assumed Business Name OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: SPECIALTY ITEMS 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 Name Ignette Herrick 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilitig Manufacturing Retail Trade Finance, Insurance, and Real Estate Wholesale Trade Agriculture Mining Construction Services Phone number (optional): _ 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 PO Box 83720 CODV IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 03/06/1998 09:00

CK: 77100 CT: 95296 BH: 88212

1 8 20.00 = 20.88 ASSUM NAME '

D 12-11125

Signature Dimette Herrich Printed Name: <u>LYA/ETT</u> Capacity: owner. (see instruction # 8 on back of form)