ASSUMED BUSINESS RAME EFFECTIVE **CERTIFICATE OF**

Pursuant to Section 53-504, Idaho Code, the undersigned 2005 DEC 27 AM 9: 40 submits for filing a certificate of Assumed Business Name.

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

SECRETARY OF STATE STATE OF IDALIA

| OWE OF ITAIO | |
|---|--|
| The assumed business name which the undersigned use(s) in the transaction of business is: | |
| Freestone Stu | llo |
| 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Barhara Michener 2000 Mountain Coverd, Boise 83702 | |
| | |
| 3. The general type of business transacted under the assumed business name is: | |
| Retail Trade Av T Transportation and Public Utilities | |
| Wholesale Trade | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| 4. The name and address to which future correspondence should be addressed: | Secretary of State 700 West Jefferson Basement West PO Box 83720 |
| Barbara Michener 2000 Mountain Cove Al Boise, ID 83702 | Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgment | Phone number (optional): |
| COPY is (if other than # 4 above): | |
| | Secretary of State use only |
| Signature <u>Barbara Michener</u> Printed Name: <u>Barbara Michener</u> Capacity/Title: <u>oconer</u> | IDAHO SECRETARY OF STATE 12/27/2005 05:00 |
| (see instruction # 8 on back of form) | 2 12/27/2005 05:00 CK: 98 CT: 158810 BH: 928494 |