

CERTIFICATE OF ASSLIMED BUSINESS NAME

FILED EFFECTIVE 2005 SEP 26 PM 12: n5

ASSUMED BUSINESS NAM Pursuant to Section 53-504, Idaho Code, the undersign submits for filing a certificate of Assumed Business Name of Please type or print legibly. NOTE: See instructions on reverse before filing. The assumed business name which the undersign.	lame.	
The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name DPKB Enter prises LLC 345 (W41946)	s eur	ity or individual(s) doing Complete Address Highway 12, orofivo, ID 83544
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: DPKB Exerprises UC 3472 Highway 12 ORD TD 83544 5. Name and address for this acknowledgment copy is (if other than # 4 above):	ne a	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
Signature: Xorani & Bierbouek Printed Name: Karen T. Bierbower Capacity/Title: CFO (see instruction # 8 on back of form)	gicophlorasian formstabh. p65 Revisel 04/2003	Secretary of State use only IDANO SECRETARY OF STATE 09/26/2005 05:00 CK: 628625 CT: 172699 BH: 913676 1 8 25.60 = 25.60 ASSUM MANE # 2 1 92049