

## CERTIFICATE OF ASSUMED BUSINESS NAME

08 JAN -7 AM 8: 31

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

<ol> <li>The assumed business name which the un business is:</li> </ol>	idersigned use(s) in the transaction of
NAI BLACK	
2. The true name(s) and business address(es business under the assumed business name	s) of the entity or individual(s) doing ne: Complete Address
BLACK COMMERCIAL INC	107 S HOWARD, STE 600 SPOKANE, WA 99201
BLACK REALTY MANAGEMENT INC	107 S HOWARD STE 600 SPOKANE WA 99201
ביים אול פין	inder the assumed business name is:
Retail Trade Transportatio Wholesale Trade Construction XX Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  BLACK COMMERCIAL INC	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
ATTN: GLORIA RIES  107 S HOWARD, STE 600	(208) 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	nent
	Secretary of State use only
gnature: <u>\$\text{\text{GLORIA \ A RIES}}\tag{\text{Sighature required}}\tag{\text{Sighature required}}\text{Sighature r</u>	Separation   Secretary of State
apacity/Title: CFO / CORP SECRETARY	O1/07/2008 05 200 CK: 134556 CT: 220028 BH: 10933