CERTIFICATE OF

FILED EFFECTIVE

D109218

ASSUMED BUSINESS NAME 2007 MAR 12 AM 9: 32
Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Intermountain Orient, Inc.	1447 Tyrell Ln. / Boise / ID / 83706
(C68839)	
3. The general type of business trans	sacted under the assumed business name is:
	sportation and Public Utilities
	culture Submit Certificate of
Manufacturing Mini	ng Assumed Business
Finance, Insurance, and Re	al Estate Name and \$25.00 fee to:
4. The name and address to which fi	uture Secretary of State
correspondence should be address	ssed: 700 West Jefferson
Intermountain Orient, Inc.	Basement West PO Box 83720
1447 Tyrell Ln.	Boise ID 83720-0080
Boise, ID 83706	208 334-2301
5. Name and address for this acknowledge.	owledgment Phone number (optional):
COPY IS (if other than #4 above):	208-384-5600
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	Secretary of State use only
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(algnature required) inted Name: Mike Clements	IDAHO SECRETARY OF STA