SEP-18-2007 11:26A FROM: DUNCANS

2087624266

TO: 12083342080

P.1/3

CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, the	undersigned
submits for filing a certificate of Assumed Bus Please type or print legibly. NOTE: See instructions on reverse before	STATE OF IDAHO
1. The assumed business name which the under business is: Whole Lot	
 The true name(s) and business address(es) of business under the assumed business name Name 	
Trisha Campbell	8917 Fitzue Drive
	Hayden, ID, 83835
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Trisha Campbell 8917 Fitzue Drive Hayden, ID, 83835	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Bolse ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgmen copy is (if other than #4 above):	
ignature: ORPDEN inited Name: Trishal: Campbell apacity/Title: OUTPOK. (see instruction # 8 on back of form)	Becretary of State use only IDAHO SECRETARY OF STATE 09/18/2007 05:0 CK: 1289615 CT: 172099 BH: 107