



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned uses in the transaction of business is:

Pacific Genesis

SECRETARY OF STATE
STATE OF IDAHO

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name Complete Address
LAWANDA L. DWORSHAK 353 E. CLOVERLEAF Hayden ID 83835
Dr. Sidney Golinsky N. DPhd 1917 Belmont Ave Carson City NV 89701

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-762-4835

LAWANDA L. DWORSHAK
P.O. Box 3439
Hayden, ID 83835-3439

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: LAWANDA L. DWORSHAK

Printed Name: LAWANDA L. DWORSHAK

Capacity: President

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

02/11/1999 09:00
CK: 110757594 CT: 110417 BH: 107112

1 @ 20.00 = 20.00 ASSUM NAME # 2

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