Capacity/Title: (

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned

Pursuant to Section 53-504, Idano Code, the shades signed submits for filing a certificate of Assumed Business Name. 2007 MAY 29 AM 9: 38 Please type or print legibly.

NOTE: See instructions on reverse before filing. STATE OF IDALIA 1. The assumed business name which the undersigned use(s) in the transaction of business is: HARRIS FAMILY CONSULTANTS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: **Complete Address** Name CLIFFORD L. HARRIS 440A KAVENWAY CHUBBUCK FD 83202 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of **Assumed Business** Manufacturing Mining Name and **\$25.00** fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 CLIFFORD L. HARRIS Boise ID 83720-0080 440A RAVEN WAV 208 334-2301 CHUBBUCK, ID 83201 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): 208-237-9622 Secretary of State use only Signature:/ DAHO SECRETARY OF STATE 05/29/2007 05:00 CK: 234 CT: 213793 BH: 1056126 Printed Name: 1 @ 25.00 = 25.00 ASSUM NAME # 2