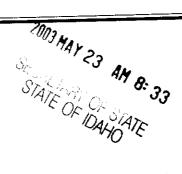


## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



The assumed business name which the undersigne business is:	ed use(s) in the transaction of SA
North American PIFE Be	
The true name(s) and business address(es) of the business under the assumed business name:  Name  HE Hydro, LLC  1419  130	
. The general type of business transacted under the	
Retail Trade	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
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional):  208 - 345 - 0833
	Secretary of State use only
Stabin.p65	

Signature: Signature: (signature required)

Printed Name: Y-jc/I V Nya V st

Capacity/Title: Member / Principal, SEE

(see instruction # 8 on back of form)

formstabn formstabn.pf Revised 09/2002

IDANO SECRETARY OF STATE **96/24/2003 95:00** CK: NO CK # CT: 158010 BN: 687617 1 @ 25.00 = 25.00 ASSUM NAME # 2

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