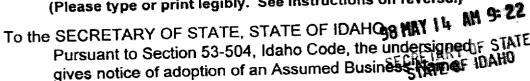
CERTIFICATE OF ASSUMED BUSINESS NAME

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





Pursuant to Section 53-504, Idaho Code, the undersigned F STATE gives notice of adoption of an Assumed Business HAPPER IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: MEDMAN PARTNERSHIP 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name P O BOX 1706, HAYDEN, ID 83835 BRIAN M. JORGENSEN 83835 P O BOX 1706, HAYDEN, ID BARRY W. FEELY 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Mining Construction Services Phone number (optional): ____ 4. The name and address to which future correspondence should be addressed: MEDMAN PARTNERSHIP Submit Certificate of Assumed Business Name and \$20.00 fee to: P O BOX 1706 Secretary of State HAYDEN, ID 83835 700 West Jefferson 5. Name and address for this acknowledgment Basement West PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 MOUNTAIN WEST SAVINGS BANK, F.S.B. 208 334-2301 P O BOX 1059 - 125 IRONWOOD DRIVE Secretary of State use only IDANO SECRETARY OF STATE COEUR D'ALENE, IDAHO 83816 95/14/1998 **99:0**0 Signature:

D 14976

Printed Name: BRIAN M. JORGENSEN/BARRY W. FEELY

PARTNER PARTNER Capacity:

(see instruction # 8 on back of form)