

## CERTIFICATE OF ASSUMED BUSINESS 9 NAME AM 8: 41

| To the SECRETARY OF STATE OF IDAHO  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 use(s) in the transaction of business is:  Fiber Works   |  |
| 2. The true name(s) and business address(e business under the assumed business na Name  Sandaa L. Gill  Sandaa L. Gill  | es) of the entity or individual(s) doing ame is/are:  Address PO Box 1928, Ke tchum, JD 83340 PO Box 1928, Ketchum, JD 83340   |
| 3. The general type of business transacted under the assumed business name is:  Refail & Services  See categories on the reverse  |  |
| 1. The name and address to which correspondence should be addressed:  FI ber works PO Box 1928  Metchum, Id 83340  Signed Heory S. Sigle  By Webry S. Mile  Capacity Oroner |  |
| Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080                                     | Customer#  IDAHO SECRETARY OF STATE  Secretary 3(\$4,6 (4) 328 09 : 00  1 0 20.00 = 20.00 ASSUM NAME  20.00   20.00 ASSUM NAME |