Capacity:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAMELED EFFECTIV (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 use(s) in the transaction of business is: 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 1113 CSREET, CHAD Name STEVEN 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: Submit Certificate of **Assumed Business** Name and \$29:00 fee to: 25,00 Secretary of State 700 West Jefferson **Basement West** 5. Name and address for this acknowledgment PO Box 83720 copy is (if other than # 4 above): Boise ID 83720-0080 America 208 334-2301 Secretary of State use only peord Alene, IDAHO SECRETARY OF STATE Signature: 04/18/2006 05:00 CK: NO CK # CT: 158018 BH: 949859 + 0×× Printed Name: 25.00 ASSUM NAME # 2 25.00 =