NAME undersigned iness Name.FILED EFFECTIV' 08 SEP - 3 AN 8: 40 SECRETARY OF STATE STATE OF IDAHOfiling.
rsigned use(s) in the transaction of
of the entity or individual(s) doing Complete Address <u>Complete Address</u> <u>Complete Address</u> <u>Complete Address</u> <u>Complete Address</u> <u>Complete Address</u> <u>Source Ud 23703</u> er the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
208 334-2301 t Phone number (optional):
Secretary of State use only D124510 IDAHO SECRETARY OF STATE 09/03/2008 05 = 00 CK: 1164 CT: 229381 BH: 1134208 1 & 25.00 = 25.00 ASSUM NAME #