



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.

FILED/EFFECTIVE

AUG 20 PM 2:22

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

NATIONAL MORTGAGE RESOURCE

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

SPECIAL MORTGAGE

P.O. BOX 5582 / 220 E.

SOLUTIONS IDAHO, INC.
C123396

AVE. N. STE 1A
KETCHUM, ID 83340

3. The general type of business transacted under the assumed business name is:

- | | |
|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

SPECIAL MORTGAGE SOLUTIONS
P.O. BOX 5582
KETCHUM, ID 83340

5. Name and address for this acknowledgment copy is (if other than # 4 above):

SAM E.

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

Phone number (optional):

208-622-8383

Secretary of State use only

Signature: Eric R Hochendoner

Printed Name: ERIC R HOCHENDONER

Capacity: PRESIDENT/BROKER
(see instruction # 8 on back of form) OWNER

g:\corpforms\labn form\labn.p65
Revised 01/2001

IDAHO SECRETARY OF STATE
08/20/2001 05:00
CK: 1017 CT: 102916 BH: 414593
1 @ 20.00 = 20.00 ASSUM NAME # 2

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