CERTIFICATE OF ASSUI (Please type or print legibly.) To the SECRETARY OF STATE, STA	MED BUSINESS NAME 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 \$\frac{\partial}{2} \frac{\partial}{2} \par	
 The assumed business name which the ur business is: 	10 E
PRE-CAMBRIAN	PRESS Caldwell-Ashbu
The true name(s) and business address(es business under the assumed business name	s) of the entity or individual(s) doing ne is/are:
Bruce Merrick	Complete Address 83607 15234 Castle Way, Caldwe
J. Blaine Runner	3 89641 Runner Rd.
De loves Merrick 3. The general type of business transacted ur (mark only those that apply)	Ashby NE 69333-9723 15234 Castle Wy Caldwell nder the assumed business name is: 10 83607
Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
 The name and address to which future P correspondence should be addressed: 	hone number (optional): 208 454-3826
Caldwell 10 83607	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgmen copy is (if other than # 4 above): Key Bank Attn: Pa	PO Box 83720
Z 0	Secretary of State use only
(aldwell, 1) 83606- 1215 Signature: <u>Functo minim</u>	IDAHO SECRETARY OF STATE 12/11/2000 09:00 CK: 1000 CT: 139446 BH: 365774
Printed Name: BRULE A MERRIL	1 8 28.88 = 28.88 ASSUM NAME # 2
Capacity: PAR + NES— (see instruction # 8 on back of form)	D41074