Signature:

Printed Name: Kick

Capacity: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) FILED/EFFEC To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned AM 9: 16 gives notice of adoption of an Assumed Business Name. SHATE OF WARD 1. The assumed business name which the undersigned use(s) in the mansablion of business is: STATE OF IDAHO 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 M. Rush M7 E15th, Idado Fulls, Td. 83404 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Retail Trade Manufacturing Finance, Insurance, and Real Estate Wholesale Trade Agriculture Mining Services Construction 4. The name and address to which future correspondence should be addressed: Submit Certificate of 15th Idula Fulls, Id. 83404 Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 CODV IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 SAME AS #4 Secretary of State use only

IDAHO SECRETARY OF STATE

02/07/2000 09:00 CK: 9111 CT: 126311 BH: 287771

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