(see instruction # 8 on back of form)

| CERTIFICATE OF ASSUMED BUSINESS N (Please type or print legibly) | (A) (D) (D) (C) |
|--|---|
| 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 (a) | FILED 199 AUG -9 PM |
| business is: | n the transaction gr |
| RIVER COUNTRY MOTEL & RV PARK | - Andrews |
| The true name(s) and business address(es) of the entity or ir business under the assumed business name is/are: | dividual(s) doing |
| Name Complet | e Address |
| n . – | 4 PRIESTRIVER 10 83856 |
| DORIS SMYLY. PO BOX 664 PA | IEST RIVER A 83856 |
| | |
| Wholesale Trade Agriculture Finance, Services Construction Mining 4. The name and address to which future | rtation and Public Utilities Insurance, and Real Estate |
| correspondence should be addressed: | nit Certificate of |
| DAVID SMYLY Ass | med Business |
| POBOX 664 | e and \$20.00 fee to: |
| 1 N 1621 N 1 V EN. 1 1 N 2 20 3 N | etary of State |
| | West Jefferson |
| COPY IS (if other than # 4 above): | 3ox 83720 |
| | 9 ID 83720-0080 334-2301 |
| | |
| 1 | TALLS OF SOCIETABLE AND MARKET |
| Signature: Signature: 1 | MMyEPSIMY.#.SIME 3/16/1999 69:60 |
| Printed Name: David Smyly | |
| | 3/10/1999 09:00 901 CT: 11950 3H: 240630 |