CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAH FILED/EFFECTIVE Pursuant to Section 53-504, Idaho Code, the undersigned - 6 AM 8: 38 gives notice of adoption of an Assumed Business Name

business is: Bowersox	e undersigned use(s) in the transaction of
 The true name(s) and business address business under the assumed business r Name William A Sandra Bowersox, Brett Bowersox	S(es) of the entity or individual(s) doing name is/are: Complete Address P.O. Box 48, Ashton, Id 83420 1335 N. 3675 E., Ashton, Id 83420
3. The general type of business transacted (mark only those that apply) Retail Trade Manufactur Wholesale Trade XX Agriculture Construction Services Construction 4. The name and address to which future correspondence should be addressed:	under the assumed business name is: ring
P.O. Box 48 Ashton, Id 83420 5. Name and address for this acknowledgme copy is (if other than # 4 above): Bank of Idaho	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
Ashton, Id 83420 nature: Bill Bowlfe	Sec ions , Sicretary, Of Sipite 94/96/2000 09:00 CK: 770 CT: 78502 BH: 306366 1 0 20.00 = 20.00 ASSUM NAME 0 2

Printed Name:

(see instruction # 8 on back of form)

Capacity:___