## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reversal) To the SECRETARY OF STATE, STATE OF IDAHO SECRETARY OF STATE, STATE OF IDAHO 99 FEB 12 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name TARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: LMPROVEMENTS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): \_ correspondence should be addressed: NPROVEMENTS Submit Certificate of Assumed Business Name and \$20.00 fee to: O. Box 861 KIMBARI Secretary of State 3341 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above); PO Box 83720 Boise ID 83720-0080 208 334-2301

Printed Name: MICHAEL P. MOUD?

Capacity: GENERAL PARTNER

(see instruction # 8 on back of form)

Secretary of State use only
IDAHO SECRETARY OF STATE

62/12/1999 69:00 CK: 4458 CT: 111861 BH: 187637

1 0 20.00 = 20.00 ASSUM NAME # 2

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