## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) 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(s) in the transaction of business is: Ascade 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 4100 1751 W HAMDSON AVE CORVIN ALERE IN \$355 Kidla 3. 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 correspondence should be addressed: Submit Certificate of Assumed Business. Name and \$20,00 fee to: ceur d Here Secretary of State Kimber K 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 MANUAL COLUMN CO 10/21/1998 **09:0**1 Printed Name: D19230 Kimbee Rioto Capacity: 1/18 ice President

(see instruction # 8 on back of form)