CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) 99 FEB 25 PM 2: 04 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 Narrate OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: SHUFFLE INN 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 Name 633 2 NO LUE South T.F. 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 Wholesale Trade Agriculture Finance, Insurance, and Real Estate Construction Services Mining Phone number (optional): 733-9893 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 02/25/1999 09:00 CK: 2577 CT: 105815 BH: 191328 Signature

.p85 Revisit

1 0 20.00 = 20.00 ASSUM NAME # 2

D23479

Printed Name: TERRYJ.Z.
Capacity: OWNER

(see instruction #8 on back of form)