CERTIFICATE OF ASSUMED BUSINESS NAME

.

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

08 FEB 27 AM 8: 51 SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the und business is: Selkirk Performant	ce
2. The true name(s) and business address(es) business under the assumed business name Name	of the entity or individual(s) doing e: Complete Address Box 1866 Bonners Ferry Td 83805
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: According Festive To 8380: 5. Name and address for this acknowledgmen copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Signature: Printed Name: Capacity/Title: (see instruction # 8 on back of form)	Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE OP/27/2008 BH: 1101536 CK: 2302 CT: 22308 BH: 1101536 1 25.08 = 25.00 ASSUM MANE #