Printed Name:

(see instruction # 8 on back of form)

Capacity:

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) Pursuant to Section 53-504, Idaho Code, the undersigned of FEB 23 All 10: 28 To the SECRETARY OF STATE, STATE OF IDAHOLED/EFFECT 1. The assumed business name which the undersigned use(s) in the transaction of business is: , MERICAN TRAL 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 Alex OHO 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 Phone number (optional): Zo8-825-9020 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: EDEN I Secretary of State 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 Secretary of State use only IDANO SECRETARY OF STATE 02/23/2006 09:06 CK: 84178385640 CT: 127145 BH: 292686 Signature: 1 0 28.00 = 28.00 ASSUM NAME # 2