CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAH 8: 59



| 4 | Pursuant to Section 53-504, Idaho Code, gives notice of adoption of an Assumed B. The assumed business name which the under | Business Nama HO |
|---------|--|---|
| 1. | The assumed business name which the under business is: | relaigued dae(a) in the pransaction of |
| | TRI-STATE MOBILE HO | BME SERVICE |
| 2. | The true name(s) and business address(es) business under the assumed business name | |
| | JOHN 5 SANBORN JR. | Complete Address |
| | JUFIN D MANDUCIN VIC. | HAYDEN, IDAHO 23935-3590 |
| 3. | The general type of business transacted und (mark only those that apply) | der the assumed business name is: |
| | ☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction | Transportation and Public Utilities Finance, Insurance, and Real Est Mining |
| 4. | The name and address to which future correspondence should be addressed: | . Submit Certificate of |
| | TRI-STATE MOBILE HOME SERVICE PO BOX 3503 | Assumed Business Name and \$20.00 fee to: |
| | HAYDEN, 100410 93835 | Secretary of State 700 West Jefferson |
| 5. | Name and address for this acknowledgment copy is (if other than # 4 above): | PO Box 83720 |
| | SAME | Boise ID 83720-0080 208 334-2301 |
| | | Induc-Secretables estating |
| | | 10/20/1997 09:00 CK: 2462 CT: 88668 BH: 48844 |
| Signat | ure: Min Susa | 1 0 20.00 = 20.00 ASSUM HAME |
| _ | | 1 9033 |
| Printed | d Name: <u>GINA PK/5C0</u> | [|

(see instruction # 8 on back of form)