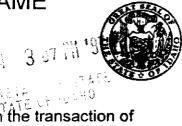
CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



| de, the undersigned described by the undersig |
|--|
| ndersigned use(s) in the transaction of |
| s) of the entity or individual(s) doing me is/are: Complete Address N 3 700 E Financial Land |
| nder the assumed business name is: g |
| Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Secretary of State use only IDAHO SECRETARY OF STATE DATE 03/24/1997 0900 75999 2 CK *: NO CK * CUST* 78718 ASSUM NAME 10 20.00= 20.00 |
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