

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

2007 HAY 21 AH 8:51

SECRETARY OF STATE
STATE OF IDAHO

 The assumed business name which the undersigned use(s) in the transaction of business is: 		
OPPORTU	NITY PLU	JS
The true name(s) and business address(es) business under the assumed business name) :	entity or individual(s) doing Complete Address 1050 CLOVER; BOISE, ID 83703
3. The general type of business transacted und	ler the a	assumed business name is:
Retail Trade Transportation	and Pul	olic Utilities
 ✓ Wholesale Trade	ŧ	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
		Secretary of State use only
nature: (signature required) FRED GODDARD	g:\corp\forms\abn forms\abn.p65 Revised 04/2003	IDAHO SECRETARY OF STATE
pacity/Title: OWNER (see instruction # 8 on back of form)	g.\corp	CK: 1220 CT: 213543 BH: 10544 1 0 25.00 = 25.00 ASSUM NAME