Signature:>

Capacity:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned 16 PM 2: 21 gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: 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 n S. Mack P.O. Box 149 m. Wade 599 Bucking 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Manufacturing 4 Transportation and Public Utilities X Retail Trade Agriculture : Finance, Insurance, and Real Estate Wholesale Trade Construction Mining Services Phone number (optional): 188-4866 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODY IS (If other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only

IDAHO SECRETARY OF STATE 12/17/2002 05:00 CK: 3768288243 CT: 158810 BH: 651753 1 8 20.00 = 20.00 ASSUM NAME # 2

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