## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction business is: Nevida Properties 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 Po Box 1292 Twin Falls 1083363 Po Box 1292 Twin Falls 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 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Box 1292 Secretary of State Twin Falls 1D 83303 700 West Jefferson Basement West 5. Name and address for this acknowledgment 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

12/01/1998 09:90 CK: 1354 CT: 187458 BH: 165933

1 9 20.00 = 20.00 ASSUM NAME # 2 20.399

Signature: Rex S. Lefargee

Capacity: Partner

(see instruction # 8 on back of form)