



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
2003 MAY -8 AM 9:05

STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

RYLEX INVESTMENTS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

JEROD L. KEYSER

P.O. BOX 203, PRIEST RIVER, ID 83856

AMBER D. KEYSER

P.O. BOX 203, PRIEST RIVER, ID 83856

3. The general type of business transacted under the assumed business name is:

- | | |
|---|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

Jerod Keyser

P.O. Box 203

Priest River, ID 83856

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

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Nick M. Lamanna

P.O. Box 789

Priest River, ID 83856

Phone number (optional):

Signature: *Jerod Keyser*

(signature required)

Printed Name: _____

JEROD KEYSER

Capacity/Title: _____

PARTNER

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\forms\form\abn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
05/08/2003 05:00
CK: 4656 CT: 92515 BH: 679332
1 @ 25.00 = 25.00 ASSUM NAME # 2

D65206