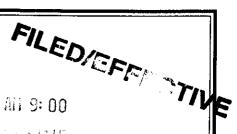


CERTIFICATE OF ASSUMED BUSINESS NAME



Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name OCT 11 ATT 9: 00

Please type or print legibly. NOTE: See instructions on reverse before filing.

e(s) in the transaction of
2~
or individual(s) doing omplete Address LTA WAY BOSS LO 83709
med business name is: Itilities
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
one number (optional):
Secretary of State use only
IDAHO SECRETARY OF STATE 10/11/2001 05:00 CK: 4845 CT: 152329 BH: 423696 1 8 28.88 = 28.88 ASSUM NAME # 2