CERTIFICATE OF FILED EFFECTIVE **ASSUMED BUSINESS NAME** Pursuant to Section 53-504, Idaho Code, the undersigned 08 APR -7 PM 3:58 submits for filing a certificate of Assumed Business Name. Please type or print legibly. SECRETARY OF STATE NOTE: See instructions on reverse before filing. STATE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: hr Unde 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 annski Enterprises 1270 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street PO Box 83720 rinu Vermann Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): COPY IS (if other than # 4 above): Secretary of State use only Signature: IDAHO SECRETARY OF STATE 04/08/2008 05:00 remu Aevermann Printed Marne: CASH CT: 158010 BH: 1108819 Capacity/Title: (see instruction # 8 on back of form)