

CERTIFICATE OF ASSUMED BUSINESS NAME ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2007 JUN 11 AM 8: 43

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

SEGRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the und business is: MCLEOD ASSOCIATE	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name David A. McLeod Mailing:	of the entity or individual(s) doing
3. The general type of business transacted un	KETCHUM, 1) 83345 der the assumed business name is:
□ Retail Trade □ Transportation □ Wholesale Trade □ Construction □ Services □ Agriculture □ Manufacturing □ Mining □ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: □ Mc L Eo D ASSUCIATES □ PO BOX 707 □ KETANM □ D B3340 5. Name and address for this acknowledgme copy is (if other than # 4 above):	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 Phone number (optional): (202) 622 - 7117
Signature: Lluil a mill	Secretary of State use only 10 555730
Printed Name: DAVID A. McLEON Capacity/Title: PRESIDENT / OWNER	IDAHO SECRETARY OF STATE 1000/10 Possional 11 1/2002 05 = 00 11 1/2002 05 = 00 12 16 20 08 = 20 08 ASSUM NAME # 2