CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigne€ gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction business is: tdraw.com 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 Name 1410 HARRISON JACK LYMAN POISE, 10 83702 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing X Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Construction Mining Services Phone number (optional): 208.345.2637 4. The name and address to which future correspondence should be addressed: ACK LYMAN Submit Certificate of Assumed Business 1410 HARRISON BLUD. Name and \$20.00 fee to: POISE ID 83707 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West PO Box 83720 CODY is (if other than # 4 above): Boise ID 83720-0080 208 334-2301 IDANG PERSETARGUAN GEATEINIY 03/28/2000 09:00 CK: CRSH CT: 128953 BH: 383366

28.86 = 28.86 RSSUN NAME # 2

34457

Printed Name:

Signature:

Capacity: OWNER SOLE PROPRIETOR

(see instruction # 8 on back of form)