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## CERTIFICATE OF ASSUMED BUSINESS NAME

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

2006 MAY 26 AH 8: 52

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF CAMP

| Starlite   | Properties   |
|--|--|
| 2. The true name(s) and business address(es business under the assumed business name Name  Vera Harder                                     | s) of the entity or individual(s) doing<br>ne:  Complete Address P.O. Box 515  Council, ID 83612 |
| 3. The general type of business transacted ur  | nder the assumed business name is:   |
| Wholesale Trade Construction   | n and Public Utilities   |
| <ul> <li>☐ Services</li> <li>☐ Manufacturing</li> <li>☐ Mining</li> <li>✓ Finance, Insurance, and Real Estate</li> </ul>                   | Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:                           |
| The name and address to which future correspondence should be addressed:   | Secretary of State<br>700 West Jefferson<br>Basement West  |
| Starlite Properties P.O. Box 515 Council, ID 83612   | PO Box 83720<br>Boise ID 83720-0080<br>208 334-2301  |
| <ol> <li>Name and address for this acknowledgme copy is (if other than # 4 above):</li> <li>Vera Harder</li> </ol>                         | ent Phone number (optional):  208-253-6300   |
| P.O. Box 515   | Secretary of State use only  |
| Council, ID 83612  nature: Leta Harder  (signature required) Vera Harder  acity/Title: Broker/Owner  (see instruction # 8 on back of form) | Secretary of State   |

05/26/2006 05:00 CK: 3126 CT: 158010 BH: 956783 1 8 25.00 = 25.00 ASSUM NAME # 2

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