

FILED/EFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2002 MAY -9 AM 8:18
SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Kaptein Builders

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

Kaptein Associates, L.L.C.

3917 Stonebrook Place, Idaho Falls

W 1922)

Idaho, 83404

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

4. The name and address to which future correspondence should be addressed:

Kaptein Associates, L.L.C.

3917 Stonebrook Place

Idaho Falls, ID 83404

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Allied Financial Services, PLLC

P.O. Box 674

Rexburg, ID 83440

Phone number (optional):

Signature: Robert E. Kaptein

Printed Name: Robert E. Kaptein

Capacity: Member

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
05/09/2002 05:00
CK: 2554 CT: 07111 BH: 464618
1 @ 20.00 = 20.00 ASSUM NAME # 3

g:\corp\forms\abn forms\abn.p65 Revised 01/2001

D 54811