CERTIFICATE OF ASSUMED BUSINESS I (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 undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) \$7.4he transaction of business is: CONSULTING FRAKES 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 604 Smith Ct. Namps. Id 8365/ 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Finance, Insurance, and Real Esta Agriculture Services Construction Mining Phone number (optional): 468.084 4. The name and address to which future correspondence should be addressed: Submit Certificate of **Assumed Business** Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301

Secretary of State use only IDAHO SECRETARY OF STATE

06/12/2000 09:00 CK: 2166 CT: 132282 BH: 325523

1 @ 26.86 = 28.86 ASSUM MANE # 2

D36563

Signature: Judy Frakes

Printed Name: Judy FRAKES

Capacity: OWNER

Dapacity. White

(see instruction # 8 on back of form)