CERTIFICATE OF ASSUMED BUSINESSAN (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) in the transaction of business is: AMERICAN WATER RESOURCES 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 DR. BRUCE 3. The general type of business transacted under the assumed business name is: PROPRIETORShip. (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining RIVER RESTORATIONS Phone number (optional): 208 - 788-2860 4. The name and address to which future correspondence should be addressed: WATER KESOURCES Submit Certificate of Assumed Business P.O. BOX 1979 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 03/16/1998 09:00 CK: 3247 CT: 95725 BH: 91813 Signature: 1 8 28.00 = 20.00 ASSUM NAME Printed Name: Dz. 013019

(see instruction # 8 on back of form) CO.