



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2006 APR 28 PM 12:35

SECRETARY OF STATE
STATE OF IDAHO

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

Land M Property Management Trust Account

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 |
|------------------------|-----------------------------|
| <u>Lloyd H. Graham</u> | <u>31656 HWY 200 E</u> |
| <u>Mickie Caswell</u> | <u>P.O. Box 74</u> |
| | <u>Sandpoint, Id. 83864</u> |

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 type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input checked="" type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 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:

Mickie Caswell
P.O. Box 74
Sandpoint, Id. 83864

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

Phone number (optional):

208-265-1550
208-290-5116

Secretary of State use only

Signature

Mickie Caswell
(signature required)

Printed Name

MICKIE CASWELL

Capacity/Title:

Manager

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE
04/28/2006 05:00
CK: 5278 CT: 158818 BH: 951995
1 @ 25.00 = 25.00 ASSUM NAME # 2

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