OF SECOND COMPANY	
CERTIFICATE OF ASSUMED (Please type or print legibly. See instance) To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Coordinates and the section of an Assumed 1. The assumed business name which the undersign business in	DBUSINES NAME structions on reverse DEFECTION OF THE STRUCTURE OF THE STRU
gives notice of adoption of an Assumed 1. The assumed business name which the undersign business is: Alticias Hitching Hitch	d Business Name ned use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name is/are hame.	entity or individual(s) doing e: Complete Address
3. The general type of l	Selle sor, Ave; Idaho Fo
, , , , , , , , , , , , , , , , , , ,	assumed business name is: Transportation and Public Utilities Finance, Insurance, and Real Estate Mining hber (optional):
Idaho Falls ID 83403 5. Name and address for this acknowledgment copy is (if other than # 4 to 1).	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
Copy is (if other than # 4 above):	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Signature: Leficia Espinoza Printed Name: Leticia, Espinoza	Secretary of State use only IDAHO SECRETARY OF STATE 63/16/2661 09:00 CK: 776 CT: 143799 3H: 385195
Capacity: Where (see instruction # 8 on back of form)	1 = 28.88 = 28.88 ASSUM NAME # 2