CERTIFICATE OF ASSUMED BUSINESS FALFD (Please type or print legibly)	
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.	
<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li> </ol>	
Omni Travél Adventures	
<ol> <li>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:</li> </ol>	
<u>Name</u> Omni Divers Underwater Services,	<u>Complete Address</u> 5579 Turret Way
L.L.C.	Boise, Idaho 83703
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade     Manufacturi     Wholesale Trade     Agriculture     Services     Construction	Finance, Insurance, and Real Estate
<ol><li>The name and address to which future correspondence should be addressed:</li></ol>	Submit Certificate of
Phillip E. Graf, Manager	Assumed Business
Omni Divers Underwater Services, L.L 5579 Turret Way Boise, Idaho 83703	.c. Secretary of State 700 West Jefferson
5. Name and address for this acknowledgm COPY is (if other than # 4 above): Gabrielle Lessard, / HTEH	Basement West
Post Office Box 1617	Secretary of State use only
Boise, Idaho 83701-1617	IDAHO SECRETARY OF STATE           01/01/1999         09:200           02         04:1999         09:200           02         04:1999         09:200           02         04:1999         09:200           02         04:1999         09:200           02         04:199         09:200           04:199         04:199         04:200           04:10:10:10:10:10:10:10:10:10:10:10:10:10:
Signature: Hulp? Suf	EX: 49151 CT: 20522 DH: 175666 1 € 20.00 = 20.00 ASSUM WANE # 3
Printed Name: Phillip E. Graf	
Capacity: <u>Manager</u> (see instruction # 8 on back of form)	groopytomstaton.pmg
	io