Capacity:

MANAGER

(see instruction # 10 on back of form)

CANCELLATION, CONTINUATION, OR AME

CERTIFICATE OF ASSUMED BUSINESS NA (Please type or print legibly) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-507 and 53-508, Idaho Code, the undersigned gives no of the action(s) indicated below: 1. The assumed business name is: ROCKY MOUNTAIN PRECAST 2. The assumed business name was filed with the Secretary of State's Office 02-09-1998 as file number ___ on Cancellation. The persons who filed the certificate no longer claim an interest in the above assumed business name and cancel the certificate in its entirety. Continuation. The persons who filed the certificate continue use of the above assumed business name for another 5 years (may be filed up to 6 months prior to the lapse date). The assumed business name is amended to: The true names and business addresses of the entity or individuals doing business under the assumed business name are amended as follow: Address: Name: Add: Delete: П The type of business is amended to read: Transportation and Public Utilities Manufacturing L Retail Trade | x Finance, Insurance, and Real Estate Agriculture Wholesale Trade Mining Construction Services The name and address to which future correspondence should be addressed is changed to read: 9. Name and address for this acknowledgment copy is: ZIONS FIRST NATIONAL BANK P.O. BOX 54 Secretary of State use only RIGBY, ID 83442 Signature: X IDAHO SECRETARY OF STATE Printed Name: _ L. MALIN BYINGTON 08/14/2002