FILED EFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME 06 MAY 24 PH 2: 54 Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. SECREDIALY OF STATE Please type or print legibly. STATE OF IDAHO NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: NORTH STAR CAPITAL MANAGEMENT 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: **Complete Address** Name HO B3616 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities **Retail Trade** Construction Wholesale Trade Agriculture Services Submit Certificate of Assumed Business Mining Manufacturing Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODV is (if other than #4 above): Secretary of State use only 910019 616 \corp\forms\abn forms\abn Signature: Revised 04/2000 IDAHO SECRETARY OF STATE Printed Name: /2006 CK: 4432 CT: 200671 BH: 956519 25.00 = 25.00 ASSUM NAME # 2 Capacity/Title: OWN (see instruction # 8 on back of form)