Printed Name.

Capacity: OWNER

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDARC Pursuant to Section 53-504, Idaho Code the Andership and gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned as êts) in the transaction of business is: COUSTIC-GLO OF IDAHO 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name ROY 6. EVANS PARMA. ID 83660-6141 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, insurance, and Real Estate Services Construction Mining Phone number (optional): (208)674-2089 4. The name and address to which future correspondence should be addressed: COUSTIC-GLO OF IDAHO Submit Certificate of Assumed Business Name and \$20.00 fee to: PARMA, ID 83660-6141 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODV IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 05/18/2000 09:00 Signatuke CK: 3899 CT: 131278 BH: 319872

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