CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions of reverse.) FFECTIVE

To the SECRETARY OF STATE, STATE OF IDAHO OF MAR 30 AT 9: 06
Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

2. T b	he true name(s) and business address(es	-	
	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
_	Name D.H. and Associates Inc.	Complete Address 1607 Davis Ave. #149	
_ _	(a Utah Corporation) (C 87255)	McCall, Idaho 83638	
3. T	he general type of business transacted ur (mark only those that apply)	under the assumed business name is:	
X	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Re	
	he name and address to which future Prorrespondence should be addressed: REO	Phone number (optional):	
	1607 Davis Ave. #149 McCall, Idaho 83638	Submit Certificate of Assumed Business Name and \$20.00 fee to:	
	ame and address for this acknowledgmen opy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
_		Secretary of State use only IDAHO SECRETARY OF STATE	
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nature:	Naud X Follows	1 8 20.00 = 20.00 ASSUM NAME	