CERTIFICATE OF SSUMED BUSINESS AME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the understand gives notice of adoption of an Assumed Business Name. ** FEB 20** 1. The assumed business name which the undersigned use(s) in the transaction of STATE OF IDAHO business is: CROSS P CONSTRUCTION 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 COLE ELQUIST 376 N. 150 E. DRIGGS, IDA. 83422 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 4. The name and address to which future Phone number (optional): _____ correspondence should be addressed: **ABOVE** Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 D.L. EVANS BANK 208 334-2301 BOX 87 Secretary of State use only IBAHO SECRETARY OF STATE TWIN FALLS, IDA. 83303 02/21/2001 **09:00** CK: 5872 CT: 24865 BH: 388222 28.86 = 29.86 ASSUM NAME # 2 Printed Name: COLE ELOUIST #D42855 Capacity: OWNER (see instruction # 8 on back of form)