TFICATE OF ASSUMED BUSINESS, (Please type or print legibly. See instructions on reverse.) TATE STATE OF IDAHO Torsidned 18.55 CERTIFICATE OF ASSUMED BUSINESS, NAME To the SECRETARY OF STATE, STATE OF IDAHO gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Antler's club 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 Thomas P.O Box 480 Moore ID P.O Box 480 Moure, Bentamin 7er 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Wholesale Trade Agriculture Finance, Insurance, and Real Estate Construction Mining Services 4. The name and address to which future Phone number (optional): _ correspondence should be addressed: RO BOX USO 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 PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only IDANO SECRETARY OF STATE

Signature: David Thems

Printed Name: 1)AVI

Capacity:

DATE 06/03/1997 98233 0900

CUST# 82327 CK #: 584

ASSUM NAME 19 20.00= 20.00

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