## TFICATE OF ASSUMED BUSINESS.) (Please type or print legibly. See instructions on reverse.) FILED/EFF CERTIFICATE OF ASSUMED BUSINESS NAME To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name, - : 1. The assumed business name which the undersigned use(s) in the transaction of STATE OF WAHD business is: 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 765 Bridle La. Post Fells Id. 83859 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 Finance, Insurance, and Real Estate Wholesale Trade Agriculture Mining Construction Services 4. The name and address to which future Phone number (optional): 28-773 5/67 correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only Signature: Hack Printed Name: Hoch W IDAHO SECRETARY OF STATE 02/25/2002 05:00 CK: 3382 CT: 157769 BH: 448256 Capacity: (see instruction # 3 on back of form)

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