CERTIFICATE OF ASSUMED BUSINESS NAME (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 undersigned 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: DRY WALL 2. The true name(s) and business address(es) of the entity or individual(steeping business under the assumed business name is/are: Name Complete Address SHANG ROB DOSS 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: SHANE DOSS Submit Certificate of Assumed Business PO BOX 125 Name and \$20.00 fee to: BLACK FOOT ID 83221 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 208 334-2301 Secretary of State use only Signature: Man fur IDAHO SECRETARY OF STATE Printed Name: SHANK DOSS 04/08/2002 05:00 CK: 896978339 CT: 158010 BH: 457534 29.00 ASSUM NAME # 2 Capacity: (see instruction # 8 on back of form)

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