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: WESTERN MOUNTAIN NATURALIST 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address RAYMOND VIZGIRDAS 202 E. BRIDGEnater CT BOISE IDAHO 83706 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 Estates Services Construction Mining 4. The name and address to which future Phone number (optional): _____ correspondence should be addressed: - Same as above - (42) 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 - Same as Boise ID 83720-0080 208 334-2301 04/23/1999 09:00 CX: 1493 CT: 114478 BH: 218077 Signature: // 1 0 28.88 = 28.88 ASSUM NAME # 2 Printed Name: KAYMOND VIZGIRDAS 125307

Capacity: Owner / Operato