CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on Pyersc.) The ECRETARY OF STATE, STATE OF IDAHO Parameter of adoption of an Assumed Business Name. The Essumed business name which the undersigned users) in the traffsaction of business is: CENTER FOR ASSISTIVE RECREATIONAL TECHNOLOGY	
2. The true name(s) and business address(es) of the entity business under the assumed business name is/are: <u>Name</u> <u>MILES MOORE</u> AND ID314 N. <u>COPINE MODEE</u> HAYDEN	vor individual(s) doing molete Address HILLVIEW DE ID 83835
<ul> <li>3. The general type of business transacted under the assumed business name is: (mark only those that apply)</li> <li>Retail Trade</li> <li>Manufacturing</li> <li>Transportation and Public Utilities</li> <li>Wholesale Trade</li> <li>Agriculture</li> <li>Finance, Insurance, and Real Estate</li> <li>Services</li> <li>Construction</li> <li>Mining</li> </ul> 4. The name and address to which future correspondence should be addressed:	
MILES MODEE PO BOX 1143 HAUDEN, 10 87835 5. Name and address for this acknowledgment copy is (if other than # 4 above): BANK OF AMERICA	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
ILED W. HAYDEN AVE. HAYDEN, ID. 83835 Signature: MILES G. MOTORE Capacity: OWNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE           09/08/2003         05 = 00           1 0 25.00 = 25.00         ASSUM NOME = 2