

CERTIFICATE OF FICTITIOUS NAME
****THIS CERTIFICATE EXPIRES 5 YEARS FROM FILE DATE****

STATE OF NEVADA)
) ss.
COUNTY OF CHURCHILL)

I / We hereby certify that I / We are conducting a _____
business in the City of Fallon and / or the County of Churchill, State of Nevada, under a designation not showing the
name(s) of the person(s) interested in conducting or carrying on said business in the City of Fallon and/or the County of
Churchill, State of Nevada, under the designation not showing the name(s) of the person(s) interested in carrying on such
business under the fictitious name of:

(FICTITIOUS BUSINESS NAME & BUSINESS ADDRESS)

The name(s) of the person(s) interested in or carrying on such business:

(1) _____
(NAME - TYPE/PRINT)

(BUSINESS OR RESIDENCE ADDRESS)

(CITY, STATE, ZIP)

(3) _____
(NAME - TYPE/PRINT)

(BUSINESS OR RESIDENCE ADDRESS)

(CITY, STATE, ZIP)

(2) _____
(NAME - TYPE/PRINT)

(BUSINESS OR RESIDENCE ADDRESS)

(CITY, STATE, ZIP)

(4) _____
(NAME - TYPE/PRINT)

(BUSINESS OR RESIDENCE ADDRESS)

(CITY, STATE, ZIP)

(1) _____
(2) _____
(3) _____
(4) _____

STATE OF NEVADA)
) ss.
COUNTY OF CHURCHILL)

On this _____ day of _____, 2007, before me personally appeared _____

known to me to be the person(s) described in and who executed the foregoing instrument, who acknowledged to me that
_____ executed the same freely and voluntarily, and for the uses and purposes therein stated.

In witness whereof I have hereunto set my hand and affixed my official seal this _____ day of _____
2007.

Notary Public/Deputy County Clerk
Churchill County, Nevada

