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27	PILED EFFECTI	VE
CERTIFICATE OF ASSUMED BUSINESS Burguant to Section 53-504, ideho Code, the	undersigned SECRETARY OF ST	AT:
submits for filing a certificate of Assumed Bus Please type or print legibly. NOTE: See instructions on reverse before	siness Name. STATE OF IDAH(	
1. The assumed business name which the undersigned use(s) in the transaction of business is: Cell Me - Used Cell Phones		
2. The true name(s) and business address(es) business under the assumed business name Name Project KOPEG, Inc (CIL28173)	of the entity or individual(s) doing : Complete Address 11880 W President Dr Ste E Boise, ID 8371	3
<ul> <li>3. The general type of business transacted und</li> <li>Retail Trade</li> <li>Transportation</li> <li>Whoiesale Trade</li> <li>Construction</li> <li>Services</li> <li>Agriculture</li> <li>Manufacturing</li> <li>Mining</li> <li>Finance, Insurance, and Real Estate</li> </ul> 4. The name and address to which future correspondence should be addressed: <ul> <li>Mike Green</li> <li>11880 W President Dr Ste E</li> <li>Boise, ID 83713</li> </ul> 5. Name and address for this acknowledgment copy is (if other than #4 above):	and Public Utilities Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301	
Signature:	Becretary of State use only IDANO SECRETARY OF 12/15/2006 CK: 179616 CT: 172899 1 2 25.68 = 25.66 AS	STATE 05:00
Capacity/Title:President (see instruction # 8 on back of form)	=	9122