

Signature: Rull A B

Capacity/Title: OWNE

(see instruction # 8 on back of form)

Printed Name:

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

INFEB 10 AMII: 13

SECRETARY OF STATE
STATE OF IDAHO

submits for filing a certificate of Assumed Business Name. Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: KOOL MUSCLE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name PO BOX 1849 MCCALL ID 83638 RUSSELL A BUTLER 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of Assumed Business Manufacturing Mining Name and \$25.00 fee to: Finance, Insurance, and Real Estate Idaho Secretary of State The name and address to which future 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 RUSSRLL BUTLER (208) 334-2301 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): Secretary of State use only

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