Printed Name

Capacity: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Nov 10 12 12 PH 199 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: 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name 837/3 Do134 4420 0 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 Estate Services Construction Mining Phone number (optional): 376 0920 4. The name and address to which future correspondence should be addressed: 837/3 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 Boise ID 83720-0080 208 334-2301 11/10/1999 09:00 CK: 1643 CT: 122848 BH: 265399 Signature: 20.00 = 20.00 ASSUM NAME # 2

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