CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) 98 AUG 24 AM 11: 45 To the SECRETARY OF STATE, STATE OF IDAHO 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: Adventures in Learning 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 MISCOW IT 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Útilities Retail Trade Manufacturing Finance, Insurance, and Real Estate Agriculture Wholesale Trade Construction Mining Services Phone number (optional): 1208 183-1835 4. The name and address to which future correspondence should be addressed: Adventures in Learning Submit Certificate of Assumed Business atricia nomas Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only IDMO SECRETARY OF STATE

CK: 2004 CT: 183100 DM: 139216

1 0 28.00 = 20.00 ASSUN NAME

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Printed Name: + 4 Capacity: (see instruction # 8 on back of form)