227CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDANS JAN -7 AMID: 15 Pursuant to Section 53-504, Idaho Code, the undersigned STATE gives notice of adoption of an Assumed Businessinane DAHO 1. The assumed business name which the undersigned use(s) in the transact on of business is: Koofing 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name **Complete Address** Micha 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 4. The name and address to which future Phone number (optional): ____ correspondence should be addressed: 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 Sacreters of State-useneely 01/07/1998 09:00 LX: 66542709745 CT: 92159 BH: 78447 Signature: Muchaud 1 8 20.80 = 20.00 ASSUN NAME D10985 Printed Name: 7// Capacity: OWNS (see instruction # 8 on back of form)