

Capacity/Title: Ot

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

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STATE OF STATE

NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Kuby Frog Entertainment 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Michael Hansen Karen Hansen 730 Military Dr Coeurd'Alene, 11 Holly Hansen Lean Hansen Michael Beckett 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade ✓ Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 730 Military Dr Boise ID 83720-0080 Coeur d' 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than #4 above): 2012-818-5182 Secretary of State use only Signature: IDAHO SECRETARY OF STATE Printed Name: \

08/02/2004 05:00 CK: 1005 CT: 158010 BH: 758521 1 0 25.00 = 25.00 ASSUM NAME # 2