



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2006 AUG 11 AM 9:24

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
OFFICE OF THE

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Koffee Korner

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

Kimberly Ann Mahon 119 Illinois Ave. Council 83612
Melissa Ann DeHaas 119 Illinois Ave. Council 83612

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Kim Mahon
P.O. Box 659
Council, Idaho 83612

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

Secretary of State use only

D102637

Signature: Melissa DeHaas

(signature required)

Printed Name: Melissa DeHaas

Capacity/Title: Partner

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
08/11/2006 05:00
CK: 3136 CT: 203297 BH: 969576
1 @ 25.00 = 25.00 ASSUM NAME # 2