227 "VE CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) 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: CKA-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 thur 5 Malin ZIII JAMES (mare D 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 correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Crowe Jamis 2111 83935 Secretary of State 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 CODV IS (if other than # 4 above): Boise ID 83720-0080 DAME 208 334-2301 Secretary of State use only 237 2034 Signature; IDAHO SECRETARY OF Malin Printed Name: thur 25/2004 corputorms/abn.pm6 CK: 6281 CT: 158010 25.00 ASSUM NAME # 3 Capacity: WIN PF (see instruction # 8 on back of form)