CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO 98 MAR -2 AN 11: 97 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Busine CONSTARY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: JAVA HUT OF Cound'Alene 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 4205 Aprilossa Rd MARY OLCOVICH 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 Finance, Insurance, and Real Estate Agriculture 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 Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above); PO Box 83720 Boise ID 83720-0080 BANK OF AMERICA 208 334-2301 APPLEWAY BRANCH #96503 W. 501 Appleway Secretary of State use only Coeur d'Alene, ID 83814 IDAHO SECRETARY OF STATE

03/02/1998 09:00 CK: 3758145812 CT: 35000 BH: 86547

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(208) 887 3537 Signature: **Printed Name:** Capacity: (see instruction # 8 on back of form)

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