CERTIFICATE OF ASSUMED BUSINESS (Please type or print legibly. See instructions on reverse.) 01 OCT -3 AM 10: 14 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 $IE \ OF \ ID$ 1. The assumed business name which the undersigned use(s) in the transaction of business is: Applied Cognitive Sciences 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 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Retail Trade Manufacturing Wholesale Trade Finance, Insurance, and Real Estate Agriculture Services Construction Minina Phone number (optional): 208-882-7273 4. The name and address to which future 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 Same 208 334-2301 Secretary of State use only Signature: IDAHO SECRETARY OF STATE 0/03/2001 05:00 **Printed Name:** Capacity:

(see instruction # 8 on back of form)