227 CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) 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. 11 1.; 5:48 1. The assumed business name which the undersigned use(s) in the transaction of business is: PALE'S GUN REPAIR + Supply 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 164E, ANDERSON I DANG FALLINTE DAVID 73401 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing **Retail Trade** Finance, Insurance, and Real Estate Agriculture Wholesale Trade Mining Construction Services Phone number (optional): 524-5662 4. The name and address to which future correspondence should be addressed: Submit Certificate of E'S Cour Recome + Supply Assumed Business Name and \$20.00 fee to: 164 E ANDEREN FORMO FALLS TOL 83401 Secretary of State 700 West Jefferson Name and address for this acknowledgment Basement West PO Box 83720 COPY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only LINAHD SECRETARY OF STATE 08/11/1997 09:00 CX: 1700 CT: 65575 DH: 26785 Signature: 1 9 28.00 - 20.00 ASSUM NAME Printed Name: corplice minuter 7/14 Capacity: (see instruction # 8 on back of form)