Capacity: PROPRIETOR

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse FILED/EFFECTIVE FILED/EFFECTIVE 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: THE STANDARD WAVE 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 MICHAEL W. ZOHNER 519 BITTEROOT DR. BOISE, ID 83709-0808 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 Phone number (optional): (208) 377-//72 4. The name and address to which future correspondence should be addressed: MICHAEL W. ZOHNER Submit Certificate of Assumed Business 519 BITTEROOT ORIVE Name and \$20.00 fee to: BOISE, IDAHO 83709-0808 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 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 06/29/2000 09:00 CK: 7643 CT: 133884 BH: 338228 Signature: 28.68 = 28.88 ASSUM HAME # 2 Printed Name: MICHAEL W. ZOHNER