227 CERTIFICATE OF ASSUMED BUSINESS N (Please type or print legibly. See instructions on reverse) To the SECRETARY OF STATE, STATE OF IDAHO ATTC THE 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: SILLON - DAKIEY RAALSPL 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** JOHA TAPPPILEZ 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Manufacturing Retail Trade Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): ____ correspondence should be addressed: Submit Certificate of Assumed Business LITTH STREET 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 208 334-2301 SAM = Secretary of State use only 12/99 Revision IDAHD SECRETARY OF STATE Signature 02/15/2000 09:00 CK: 2519 CT: 126758 BH: 298383 Printed Name:-1 @ 28.68 = 28.68 ASSUM NAME # 2 Capacity: 33168 (see instruction # 8 on back of form)