

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2004 SEP 17 PM 4: 37

Please type or print legibly. NOTE: See instructions on reverse before filing. STATE OF IDAHO

| Koamic Kustoms | |
|-------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The true name(s) and business address(es) or business under the assumed business name: Name Timothy Doyon Lisa Doyon | Complete Address 1327 Plumbago Street, Camarillo, CA 93010 |
| 3. The general type of business transacted under | er the assumed business name is: |
| Retail Trade | Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Bolse ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgment copy is (# other than # 4 above): | Phone number (optional): 805 388-2561 |
| ignature: Co-owner (see instruction # 8 on back of form) | IDAHO SECRETARY OF STATE 97/17/2004 05:00 CK: 9174385288KAH CT: 172699 BH: 7 |