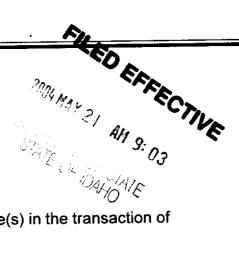
## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



The assumed business name which the unders	signed use(s) in the transaction of
business is:  KMC COMPUTERS	
2. The true name(s) and <u>business</u> address(es) of business under the assumed business name:  Name  NELINDA M. COCKEII  KEVIN L. COCKEII  3. The general type of business transacted under	Complete Address 1603 Main St. Salmon, Id. 8346 603 Main St. Salmon, Id. 83467
Retail Trade Transportation ar  Wholesale Trade Construction	
Services	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
KMC COMPUTERS/ME LINDAM. CO 1603 MAINST. SALMON, ID. 83467	PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above).</li> </ol>	Phone number (optional): 308-756-3819
SAME	Secretary of State use only
Signature: Melistan Could	1DAHO SECRETARY OF STATE  1DAHO SECRETARY OF STATE  95/21/2004 95 20  CK: 3923 CT: 179678 BH: 746424  1 9 25.90 = 25.00 ASSUM NAME # 2
Signature: (Signature required)  Printed Name: MELINDA M. COCKER [1]	IDAHO SECRETARY OF STATE  95/21/2004 95 # 66  CK: 3923 CT: 179678 BH: 746424  CK: 3923 CT: 27678 BH: 746424
Capacity/Title: 0 w ner	CK: 3923 CT: 1/96/8 INT: /46424 1 9 25.99 = 25.99 ASSUM MANE # 2
(see instruction # 8 on back of form)	D76673