Signature:_

Capacity:

Printed Name: __

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS N (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 undersected 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: KABLE BEVEMBE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Box 907 174 W STATE KAGE 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 209.939 0491 Phone number (optional): ___ 4. The name and address to which future correspondence should be addressed: Submit Certificate of **Assumed Business** Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only

IDAHO SECRETARY OF STATE 09/06/2001 05:00 CK: CASH CT: 150967 BH: 417783 0 20.00 = 20.00 ASSIM MAME M 5

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