

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 22 4 9: 25

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

- ATE

The assumed business name which the un business is:	dersigned use(s) in the transaction of
J&L Gifts and Co	ollectibles
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name Sennifer Edwards	a) of the entity or individual(s) doing ne: Complete Address Le 160 Sunshine St (dA ID 83815
3. The general type of business transacted un Retail Trade	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above): Bank of America	nt Phone number (optional):
Courd Alen ID 83815	Secretary of State use only
Signature:	100 100
Printed Name: Jennier Courses	IBAHO SECRETARY OF STATE
Capacity/Title: Owner	CK: NO CK # CT: 158818 BH: 782849

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