



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.

2009 APR -1 PM 1:45

SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE

1. The assumed business name which the undersigned use(s) in the transaction of
business is:

Quintessence

2. The true name(s) and business address(es) of the entity or individual(s) doing
business under the assumed business name:

| Name | Complete Address |
|-----------------|-------------------------|
| <u>Nova Lee</u> | <u>PO Box 883</u> |
| | <u>Hailey, ID 83333</u> |

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future
correspondence should be addressed:

Nova Lee
PO Box 883
Hailey, ID 83333

5. Name and address for this acknowledgment
copy is (if other than # 4 above):

same as above

Signature: Nova Lee

Printed Name: Nova Lee

Capacity/Title: owner

(see instruction # 8 on back of form)

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

Phone number (optional):

(208) 788-0911

Secretary of State use only

IDAHO SECRETARY OF STATE
04/01/2009 05:00
CK: 219900 CT: 172999 SH: 1163994
1 @ 25.00 = 25.00 ASSUM NAME # 2

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