

Signature:

Printed Name:

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: MonogramWeddingCakeTopper.com 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 Jennifer Jamison PO Box 1367 Meridian, ID 83680 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing Mining **Assumed Business** Name and \$25.00 fee to: Finance, Insurance, and Real Estate Idaho Secretary of State 4. The name and address to which future 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 Jennifer Jamison (208) 334-2301 PO Box 1367 Meridian, ID 83680 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only

> corptforms\abn forms\ab Revised 04/2003

Jennifer Jamison

Owner

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE

07/07/2008 05:00

CK: 2016 CT: 227611 BH: 1125796
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