Capacity: Premote

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) SECRETARY OF STATE, STATE OF IDAHO $01\,\rm MRR$ 16 Pursuant to Section 53-504, Idaho Code, the undersigned 9: 24 To the SECRETARY OF STATE, STATE OF IDAHO gives notice of adoption of an Assumed Business Nemper OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: aunt Mae's Gifts 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name 1 eary 71 2013 8e 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future correspondence should be addressed: Submit Certificate of Leavill **Assumed Business** Name and \$20.00 fee to: Jessions St Secretary of State 700 West Jefferson **Basement West** 5. Name and address for this acknowledgment PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Sould by Control of the State 03/16/2001 09:00 CK: 986090775 CT: 143709 BH: 385128 1 8 26.86 = 26.86 ASSUM NAME # 2 Signature: \_\_\_\_ Printed Name: C 1/4 43631