

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

FILED EFFECTIV

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2007 APR 11 AM 9: 25

Please type or print legibly. NOTE: See Instructions on reverse before filing. SECRETARY OF STATE STATE OF IDAHO

110312

1. The assumed business name which the undersigned business is:	ed use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Sancy Baller  Calv	complete Address  Sovernment Way  VAAlene, ID  83814
3. The general type of business transacted under the  Retail Trade  Wholesale Trade  Construction	
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  CLEATIVE Flower SHE GOVERNMENT WAY  COLVEY Alene, ID 83814	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional): 208) (0(01-1202
Signature: Sample Representative required)  Printed Name: Barry Baker  Capacity/Title: Switch	IDAHO SECRETARY OF STATE
Capacity/Title: OCHETA (see instruction # 8 on back of form)	CK: 93244989025 CT: 212011 BH: 1046017 1 0 25.00 = 25.00 ASSUM WANE # 2