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.

09 MAR 30 AM 8: 48

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

NOTE: See instructions on reverse before to	filing. STATE OF IDAHO
The assumed business name which the under business is: Designers Edge Se	• • •
The true name(s) and business address(es) or business under the assumed business name:	f the entity or individual(s) doing
3. The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 1036 Camas N Pocate 0 10 83204	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgment copy is (# other than # 4 above): Signature: Lakella D. Malkak	Secretary of State use only
Printed Name: Kathlesh O. McGreath Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE ##################################

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