

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

## FILED/EFFECTIVE

## Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

1. The assumed business name which the ubusiness is:  American Debutante	undersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(e. business under the assumed business name <u>Name</u>	Solution of the entity or individual(s) doing ne:  Complete Address  1619 North Wimbledon Ct.  Eagle, (1) 53616
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Mary A. Di Giami  I (el 9 North Wimbledon Ct)  Eagle, ID Saule  5. Name and address for this acknowledgmen copy is (if other than # 4 above):  Same	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  Phone number (optional):  (208) 98-5292  Secretary of State use only
Signature: May A. Di Gianoi  Capacity: Owner  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  07/02/2001 09 = 00  CK: 1166 CT: 148292 BH: 485823  1 0 20.88 = 20.80 ASSIM NAME 0 2  W 165 (9