

ATT. NADLEY

FILED/EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

APR 11 AM 9:01
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

~~Look-key~~ Look-key Alta's Dream Store

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>Alta Gollighugh (Home)</u>	<u>1109 Wilson Pocatello ID 83201</u>
<u>Alta Gollighugh (Business)</u>	<u>606 So. 5th Pocatello ID. 83202</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

Look-key Alta's Dream Store
606 So. 5th
Pocatello ID. 83201

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

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature: Alta Gollighugh
Printed Name: Alta Gollighugh
Capacity: _____

(see instruction # 8 on back of form)

Revision 12/99 s:\corp\forms\abn.p65

Secretary of State use only

IDAHO SECRETARY OF STATE

04/11/2001 09:00
CX: 114271871 CT: 143924 BH: 390429

1 @ 20.00 = 20.00 ASSUM NAME # 2

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