



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

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.

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

Rosemarie's

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 Rosemarie Wamelen Complete Address 1015 W. Kimball Avenue
Caldwell, ID 83605

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 checked="" 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): 208-429-9825

Rosemarie Wamelen
2207 Stephen #101
Boise ID 83706

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

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

Secretary of State use only

Signature: Rosemarie Wamelen

Printed Name: Rosemarie Wamelen

Capacity: Owner

(see instruction # 8 on back of form)

Revision 1/98

g:\corp\forms\slabn.p65

IDAHO SECRETARY OF STATE
 10/29/2002 05:00
 CK: 1562 CT: 158010 BH: 643173
 1 @ 20.00 = 20.00 ASSUM NAME # 2

DSH/HS