

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

97 MAY 14 AM 10:07
SECRETARY OF STATE
STATE OF IDAHO

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

Rainbow's End Distributors

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

Debbie McCrone P.O. Box 8111 Moscow, Id 83843

3. The general type of business transacted under the assumed business name is:

Retail trade
See categories on the reverse

4. The name and address to which correspondence should be addressed:

Debbie McCrone
P.O. Box 8111 Moscow, Id 83843

Signed Debbie McCrone

By _____

Capacity Owner/President

Submit Certificate of Assumed
Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 05/14/1997
0900 92587 2
CK #: 1222 CUST# 81402
ASSUM NAME 1@ 20.00= 20.00

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