

CERTIFICATE OF ASSUMED BUSINESS NAME

FILEDATEFO

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

Please type or print legibly.

(see instruction #8 on back of form)

20128 FM12: 35

NOTE: See instructions on reverse before filing.	STATE OF IDAHO
1. The assumed business name which the undersigned business is: We Cot Gifts	,
	Complete Address 16 Adams #32 scden City Id 83714
Retail Trade Transportation and Pull Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	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):
COPY is (if other than # 4 above):	208- 3 1 3 -3924
Signature: Asignature required) Printed Name: Shortel Batter Capacity/Title: Owner	IDAHO SECRETARY OF STATE 01/28/2003 05:00 CK: CASH CT: 158010 DH: 659568 1 8 28.86 = 28.88 ASSUM NAME # 2

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