CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHQ

| | Pursuant to Section 53-504, Idah gives notice of adoption of an As | | |
|-------------------|--|------------------------|--|
| 1. | · · · · · · · · · · · · · · · · · · · | | |
| | business is: | , | . 66 |
| | <u>L'ascadina</u> Ser | 15e5 | SCIW |
| • | | | 1 No. 1 |
| 2. | The true name(s) and business address(es) business under the assumed business nam | or individual(s) doing | |
| | , , Name | | ت جانے پر سے mplete Address ا |
| | LESLIE STEVENSON 3 | Blile C | 10 CCITY NAMPA |
| | Brandy WallingFood 3 | sille C | accity. Namer. |
| | | | 83487 |
| • | | | |
| 3, | The general type of business transacted under the assumed business name is: (mark only those that apply) | | |
| | | | |
| | Retail Trade Manufacturing Wholesale Trade Agriculture | · | nsportation and Public Utilities |
| | ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction | ☐ Mir | ance, Insurance, and Real Estate |
| | | | 9 |
| 4. | The name and address to which future Procurespondence should be addressed: | none numbei | (optional): |
| | Cas mali m Sage als | | |
| | CUSCOUTES SERVE. | | Submit Certificate of Assumed Business |
| | 3116 Garnty 1a | | Name and \$20.00 fee to: |
| | NAMOR IN 83687 | | Secretary of State |
| _ | Name and address for this call as I I | | 700 West Jefferson |
| 5. | Name and address for this acknowledgment copy is (if other than # 4 above): | ; | Basement West PO Box 83720 |
| | | · | Boise ID 83720#0080 |
| | | | 208 334-2301 |
| | | | Secretary of State use only |
| | - | Revision 12/89 | IDAHO SECRETARY OF STATE |
| Signati | Signature Sovie Q Stevenson | | 83/21/2000 0g.00 |
| _ | | | N CHOM CI: 128592 BH: 381273 |
| | Printed Name: | | 1 8 20.00 = 20.00 ASSUM NAME # 2 |
| Capacity: XARTHER | | rmskabn p85 | 1724751 |

(see instruction # 8 on back of form)

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