CERTIFICATE OF ASSUMED BUSINESS N (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO 10 58 AH 198 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: POCKET FULL OF POSES 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 AWRENCE M. HERMANSEN 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining Phone number (optional): 208-362-7575 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 5. Name and address for this acknowledgment **Basement West** CODY is (if other than #4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 08/07/1998 **09:0**0 CK: CASH CT: 182456 BH: 134936 Signature 1 # 20.00 = 20.00 ASSUM NAME **Printed Name:** Capacity: (see instruction # 8 on back of form)