CERTIFICATE OF AS (Please type or print leg	SSUMED BUSINESS NAME pibly. See instructions on reverse.)
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.	
business is:	the undersigned use(s) in the transaction of
2. The true name(s) and business addr business under the assumed business	ress(es) of the entity or individual(s) doing
Chery I Mc Dermott	Complete Address 539 W Dakhampton Dr., Eagle, II
The general type of business transacted under the assumed business name is:     (mark only those that apply)	
Retail Trade	ture
4. The name and address to which futu correspondence should be addresse  Selective Surroundings	d: Submit Certificate of
539 W. pakhampton or Eagle, In 83616	Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowled copy is (if other than # 4 above):	Secretary of State 700 West Jefferson dgment Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
,	Secretary of State use only
Signature: Chery Mc Devolt	Sev size
Printed Name: Cheryl menermott	IDAHO SECRETARY OF STATE  98/27/2902 05:00
Capacity: owner & designer  (see instruction # 8 on back of form)	OS/27/2002 05 1 00  CK: 1486 CT: 158819 BH: 484992  1 8 20.80 = 26.80 ASSUM MANE # 2