Signature:___

Printed Name: Martha

(see instruction # 8 on back of form)

Capacity: (cenera

(Please type or print legibly. 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. 1. The assumed business name which the undersigned use(s) in the transaction of business is: 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name 17486 Garnet Wilder ID 83676 21021 Cottonwood D 3. The general type of business transacted under the assumed business name is: (mark only those that apply) X Retail Trade Transportation and Public Utilities Manufacturing Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): ____ corrèspondence should be addressed: THE SISTERS 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** CODV IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 69/69/1999 09:00 CK: 1296 CT: 120269 BH: 248398

1 0 20.00 = 20.00 ASSUM NAME # 2

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