

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

Please type or print legibly.

Printed Name: DEBORAH A.

Capacity/Title: SOLE PROPRIETOR

(see instruction # 8 on back of form)

11 JAN 12 AM 8: 33

NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction business is: EMPTING TANGLES DESIGNS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name DEBORAH A. Dick 2209 EUREKA RIDGE LOOP STEPHEN E. DICK 2209 EUREKA RIDGE LOOP ORURINO, IDAHO 83544 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of Assumed Business Mining Manufacturing .. Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: Basement West PO Box 83720 2209 EUREKA RIDKELOOP Boise ID 83720-0080 OROFINO, IDAHO 83544 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): 476-0721 AmericanWest Bank Orofino Branch Secretary of State use only PO. Box 2258 Orofino, ID 83544 5 ZUUS C