CERTIFICATE OF ASSUMED BUSINESS NAME (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 \mathcal{S}_{22}^{++} gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the trans business is: LASTING MEMORIES 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 586 STRINGTOWN LN, GEORGETOWN, ID EMILY S. KEETCH 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Mining Construction Services 4. The name and address to which future Phone number (optional): ___ correspondence should be addressed: Submit Certificate of EMILY KEETCH Assumed Business PO BOX 297 Name and \$20.00 fee to: GEORGETOWN, ID 83239 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODY IS (if other than # 4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 03/18/1998 09:00 CK: 1451 CT: 95881 BH: 91954 Signature: 1 8 28.99 = 29.90 ASSUM NAME Printed Name: EMILY KEETCH Capacity: OWNER (see instruction # 8 on back of form)