

FILED

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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.

01 APR 25 AM 8:56
SECRETARY OF STATE
STATE OF IDAHO



1. The assumed business name which the undersigned use(s) in the transaction of business is:

EKLECTIC KORNER

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
<u>MARVIN P. BAILEY</u>	<u>8292 N MARABOV DR. HAYDEN ID.</u>
<u>CARLA S. BAILEY</u>	<u>8292 N. MARABOV DR. HAYDEN ID.</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed:

EKLECTIC KORNER
9294 GOVT. WAY
HAYDEN, IDAHO 83835

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

04/25/2001 09:00
CX: 1520 CT: 145527 BH: 393261

1 @ 20.00 = 20.00 ASSUM NAME # 2

1044808

Signature: Carla S. Bailey

Printed Name: CARLA S. BAILEY

Capacity: PARTNERS

(see instruction # 8 on back of form)