CERTIFICATE OF ASSUMED BUSINESS NAME
(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO
Pursuant to Section 53-504, Idaha Cada 4

(Please type or print legibly)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the under gives notice of adoption of an Assumed Business N	OD DEC 26 AN IO:
 The assumed business name which the undersigned u business is: 	se(s) in the transaction of
PASTRIES, ETC.	
The true name(s) and business address(es) of the enti- business under the assumed business name is/are:	ty or individual(s) doing
CHERLE POULSON 1045	ERINK ED
Mosc	ow IN
	83843
Sonion Agriculture Fir	ansportation and Public Utilities nance, Insurance, and Real Esta ning
The name and address to which future correspondence should be addressed: CHERLE POULSON 1045 FRINK RA	Submit Certificate of Assumed Business Name and \$20.00 fee to:
MOSCOW ID 83843 Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
767 w	Secretary of State use only

Signature: Cherle Poulson

Printed Name: CHERLE POULSON

Capacity: Awner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

12/27/2006 09:00 CK: 564 CT: 148843 BH: 369186

1 8 20.00 = 20.00 ASSUM MANE # 2

1) 41401