



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

2002 DEC 30 AM 9:26

STATE OF IDAHO

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

The Creative Edge Enterprises

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
<u>Margaret Hays</u>	<u>178 W. 300 S. - Jerome, Idaho 83336</u>
<u>Nickol Howell</u>	<u>P.O. Box 704 - Kimberly, Idaho</u>

3. The general type of business transacted under the assumed business name is:

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

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

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

The Creative Edge Enterprises
P.O. Box 704
Kimberly, Id 83341

Phone number (optional):

(208) 308-3325

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

Signature: Nickol Howell
(signature required)

Printed Name: Nickol Howell

Capacity/Title: partner

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 09/2002

IDAHO SECRETARY OF STATE
 12/30/2002 05:00
 CK: 4085 CT: 150010 BH: 653734
 1 @ 20.00 = 20.00 ASSUM NAME # 2

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