Signature: Live

Capacity:

Printed Name: Devel

(see instruction # 8 on back of form)

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 gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: McCALL'S THE MOUNTAIN GIFT STORE 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 BEVERLY L. DAVIENPORT 1012 N 3120 STRIET MICALL 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 Phone number (optional): 634 3106 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business SAM13 Name and \$20.00 fee to: Secretary of State 700 West Jefferson **Basement West** 5. Name and address for this acknowledgment PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only

abn.p85 Rev

IDAHO SECRETARY OF STATE
11/23/2001 05:00
CK: 5786 CT: 153888 BH: 431038
1 0 20.00 = 20.00 ASSUM NAME # 2

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