Capacity:__

(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.	
The assumed business name which the updates is: The COS	STA AH0
2. The true name(s) and business address(es) of the entity or individual(s) doing	
business under the assumed business na Name	ame is/are: Complete Address
THE MCCALL STORE	1012 N BIRD STRIET
BEVERLY DAVENPORT	P.O. BOX 1453
	Mc CALL 1D 83638
The general type of business transacted (mark only those that apply)	under the assumed business name is:
Retail Trade Manufacturi Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
The name and address to which future correspondence should be addressed:	Phone number (optional):
THE CASCADE STORE	Submit Certificate of
% THE MCCALL STORE	Assumed Business Name and \$20.00 fee to:
1012 N 3 RO McCALL 1D 8	Secretary of State 700 West Jefferson
Name and address for this acknowledgme copy is (if other than # 4 above):	
THE CASCADIS STOKE	Boise ID 83720-0080 208 334-2301
TO BIEVIERLY DAVENPORT	SECRETARY OF STATE
P.O. BOX 1453 Mc CALL (D 8363)	
Signature: Junily Manungary	1 9 20.00 = 20.00 ASSUM NAME # 2
Printed Name: Brukery L. Davien Port	D25913