CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name 9: 07

The assumed business name which the under the large in:	ersigned (use(s) in the transaction of STATE OF IDAHO
business is: $M + M$ TREATS	OTAL OF IDAHO
The true name(s) and business address(es) business under the assumed business name Name	of the entity or individual(s) doing is/are: Complete Address
The general type of business transacted und	TEANO FALLS ID 83404 der the assumed business name is:
(mark only those that apply) Retail Trade	Transportation and Public UtilitiesFinance, Insurance, and Real EstateMining
 The name and address to which future Ph correspondence should be addressed: 	none number (optional): 208-552-0757
MICHAEL E. NEELY 154 Plantation LN IDAMO Falls ID 83404	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
Printed Name: MICHAEL E. NEELY Capacity: OWNER (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 05/24/2002 05:00 CX: 2846 CT: 158910 BH: 467789 1 8 28.98 = 28.98 ASSUM NAME # 2