CERTIFICATE OF ASSUMED BUSINESS NAME

	(Please type or print legibly. Se	
	To the SECRETARY OF STATE, STATE Pursuant to Section 53-504, Idaho gives notice of adoption of an Ass	Code, the undersigned (1)
1.	The assumed business name which the undebusiness is: Reunions by Julie	ersigned use(s) in the transaction of
2.	The true name(s) and business address(es) business under the assumed business name	of the entity or individual(s) doing
		Complete Address 14 S. Hawithorne St. Hampa 93686 147 Lonkey Ln. Caldwell ID 83605
3.	The general type of business transacted und	,
•	(mark only those that apply) Retail Trade	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining
4.		one number (optional): (308) 466 - 5494
	Julie Chadez 504 S. Hawthorne St.	Submit Certificate of Assumed Business Name and \$20.00 fee to:
_	Nampa, ID 83686	Secretary of State 700 West Jefferson
5.	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 IDAHO SECRETARY OF STATE

Signature(

Printed Name: Julie

Capacity: <u>General Partner</u>

(see instruction # 8 on back of form)

02/03/1998 09:00 CX: 6639 CT: 93649 BH: 78723

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