



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.

10 APR -5 PM 12:33

SECRETARY OF STATE
STATE OF IDAHO

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

Strawberry Patchworks

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

Elaine Lombardi

7477 Calamonte Ln., Coeur d'Alene, ID 83815

Kathy Howard

2451 Freeland Dr, Coeur d'Alene, ID 83815

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

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

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

Elaine Lombardi

7477 Calamonte Ln., Coeur d'Alene, ID 83815

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Signature: Elaine Lombardi

(signature required)

Printed Name: Elaine Lombardi

Capacity/Title: Partner

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\form\main form\main.pdf
Revised 04/2003

IDAHO SECRETARY OF STATE
04/06/2010 05:00
CK: 1155 CT: 158818 BH: 1216361
1 @ 25.00 = 25.00 ASSUM NAME # 2

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