

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 JUN 11 AM 9: 26

SECRETARY OF STATE STATE OF IDAHO

Sugar Mammas	Baked Goods	· ———
2. The true name(s) and business address(es) of business under the assumed business name Name Anna Hill	· · · · · · · · · · · · · · · · · · ·	D1
. The general type of business transacted und	er the assumed business name is:	
Retail Trade Transportation a Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Sugar Mammas Baked Goods 504 Main Street, Suite 210 Lewiston, Idaho 83501 5. Name and address for this acknowledgmen copy is (if other than # 4 above):	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	
Anna Hill 720 Preston Avenue Lewiston, Idaho 83501	Secretary of State use only	
nature: (algneshire required) Anna M. Hill Dacity/Title: (see instruction # 8 on back of form)	IDANO SECRETARY O OBJECT CK: 454915 CT: 172899 1 0 25.88 = 25.80 A	F STATE @5 : @ BH: 1226 BSUM WAYE