CERTIFICATE OF ASSUMED BUSINES CROWNE	
To the SECRETARY OF STATE, STATE OF IDAHO  Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of Air 8:54	
<ol> <li>The assumed business name which the business is:</li> </ol>	undersigned use(s) in the transaction of
LORA'S EPECIALI	TIES
<ol> <li>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:</li> </ol>	
LORA A PEARSON	Address 209 HALVERSON PLACE
	MAILING ADDRESS
	P.D. BUX 946 MISOLETON ID 83644
3. The general type of business transacted under the assumed business name is:  **RETAIL TRADE**	
See categories on the reverse	
4. The name and address to which correspondence should be addressed:  LORA A PEARSON  P.O. BOX 946 MIDDLE TON ID 83644	
Signed ∠	Dra G Pun
By _	The the Places
Capacity	CWNER
Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer#
Secretary of State 700 West Jefferson	Secretary of State use only
PO Box 83720 Boise ID 83720-0080	Re-
33.2 33.23 3303	IDAHO SECRETARY OF STATE  98/39/2001 05:00  CK: 101 CT: 150789 BH: 416500  1 9 20.00 = 20.00 ASSUM MANE # 2  \[ \rightarrow 4 80 \rightarrow \]
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