1.	CERTIFICATE OF ASSUMED BUTCHERS (Please type or print legibly. See instruction)  To the SECRETARY OF STATE, STATE OF IDAH Pursuant to Section 53-504, Idaho Code, the gives notice of adoption of an Assumed Business name which the undersigned us business is:  DIVINE DESIGNS	SINESS NAME ons on reverse.)  O e undersigned iness Name of see(s) in the transaction of
2.	The true name(s) and business address(es) of the entity business under the assumed business name is/are:    Robin Wbreatch 408 5. The entity business name is/are:	y or individual(s) doing  mplete Address  and Aue., Sandpoint ID 8386
3.	Retail Trade Manufacturing Trade Manufacturing Fire	umed business name is: ting, designing and setting onne such as paper products - upors ansportation and Public Utilities cares, nance, Insurance, and Real Estate
4.	The name and address to which future correspondence should be addressed:  Robin Ulbred tch  408 S. Third Ave.  Sandpoint, ID 83864	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Ciamatu	Wevision 1289	Secretary of State use only  IDAHO SECRETARY OF STATE  96/95/2009 99:00
Signature. 5 6 1 1 1 6 1 1 1 6 6 1 4 6 h 1 2 29.00 = 20.00 ASSUM NAME # 2		
Printed Name: Kobin K. Wibredtch		
Capacit	ty: Owner (see instruction # 8 on back of form)	D B6318