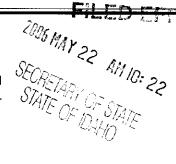
CERTIFICATE OF ASSUMED BUSINESS NAME

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.

1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and business address(es) or business under the assumed business name: Name DAVID BROSKS	f the entity or individual(s) doing Complete Address PO Box 672, Kooskiz IDB3539
3. The general type of business transacted unde Retail Trade Transportation ar Wholesale Trade Construction Services Agriculture Manufacturing Mining	
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: BLOCKSWEGGING CAKES A BOX (072	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-926-7134
	Secretary of State use only
Signature: Doval Brooks Printed Name: DAULO BROOKS	IDAHO SECRETARY OF STATE 05/23/2006 05:00
Capacity/Title: 6 W N ER (see instruction #8 on back of form)	IDAHO SECRETARY OF STATE 95/23/2006 05:00 CK: 505 CT: 15000 BH: 956169 1 8 25.00 = 25.00 ASSUM NAME # 2