



CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

(if needed)

Permit #

2006 APR 14 AM 10:05 -S

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.

STATE OF IDAHO

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

Keepsakes Forever

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

NameComplete Address

Cheryl S. Webb

1302 Taylor ave Idaho Falls ID 83404

Timothy Jade Webb

1302 Taylor ave Idaho Falls, ID

83404

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 checked="" 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	

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Cheryl S. Webb

1302 Taylor Ave

Idaho Falls, ID 83404

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

Phone number (optional):

(208)528-8742

Secretary of State use only

Signature: Cheryl S. Webb
(signature required)

Printed Name: Cheryl S. Webb

Capacity/Title: President

(see instruction # 8 on back of form)

Information form 100-100
Revised 04/2003

IDAHO SECRETARY OF STATE
04/14/2006 05:00
CK: NO CK# CT: 158010 BH: 949233
1 B 25.00 = 25.00 ASSUM NAME # 2

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