CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly)

To the SECRETARY OF STATE. STATE OF IDAHO OR FFR 23 PH 2-55



| Pursuant to Section 53-504, Idaho Code, the undersigned OF STATE gives notice of adoption of an Assumed Business State of IDAHO | |
|---|--|
| The assumed business name which the undersigned use(s) in the transaction of business is: | |
| WHILE YOU'RE | AWAY |
| The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: | |
| Name | Complete Address |
| • | 25 N. 5th ST. COEUR D'ALENE, IN 8384 |
| WAYNE NEWBY 8 | 95 N. 5kh ST. COEUR D'ALENE, Id. 83814 |
| The general type of business transacted us (mark only those that apply) | nder the assumed business name is: |
| Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction | Finance, Insurance, and Real Estate |
| 4. The name and address to which future | • |
| correspondence should be addressed: | Submit Certificate of |
| THERESA NEWBY | Assumed Business |
| 825 N. 5KD STREET | Name and \$20.00 fee to: |
| GOEUR d'ALENE, Id. 8381 | Secretary of State 700 West Jefferson |
| 5. Name and address for this acknowledgme | Basement West |
| COPY is (if other than # 4 above): | PO Box 83720 |
| 35p, 15 (, asia, size : 12515), | Boise ID 83720-0080 208 334-2301 |
| | 200 334-2301 |
| | IDANG SELVETAR STORE ONLY |
| | 8 02/23/1998 09:80 5 CK: 2868 CT: 94698 BH: 84452 |
| ignature: his sa //w/y | 1 8 20.00 = 20.00 ASSUM MAME |
| rinted Name: THERESA NEWBY | D12422 |
| Capacity: OWNER | 10/0 |
| (see instruction # 8 on back of form) | <u> </u> |