CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho gives notice of adoption of an Ass	<u> </u>
The assumed business name which the under business is:	
_ the Reading	Room
2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
GROVE St. ENTERPSISES LL	C 132 (F. TE (FERSON &
(W10685)	Boiss, JO 85762
The general type of business transacted und (mark only those that apply)	er the assumed business name is:
Retail Trade	☐ Transportation and Public Utilities ☐ Finance, Insurance, and Real Estate ☐ Mining
4. The name and address to which future Ph correspondence should be addressed: AIAN HEAD つた	one number (optional):
451 W. Main St.	Submit Certificate of Assumed Business Name and \$20.00 fee to:
BO.SE, ID. 83702	Secretary of State
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
	Secretary of State use only SECRETARY OF STATE
Ol Skot-	IDAHO SECRETARY OF STATE 97/06/2000 09:00 CK: CASH CT: 133197 BH: 331482
Printed Name: A/AW HEAD Tr.	1 9 20.00 = 20.00 ASSUM NAME # 4
Capacity: OWNER/menser	500 udas/south/cons/south/south/cons/south
(see instruction # 8 on back of form)	by D 37/79