CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME, OFFE 22 AM 9: 24

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.

Owner/Partner

(see instruction # 8 on back of form)

Capacity/Title:

SECRETARY OF STATE STATE OF IDAHO

Heidi Egen	man Designs
2. The true name(s) and business address(es business under the assumed business nam Name Everlasting Enterprises, LLC	•
(W90255)	
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Heidi A. Egerman	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
3575 N. Brookside Ln.	(208) 334-2301
Boise, ID 83714	
5. Name and address for this acknowledgme copy is (If other than # 4 above):	e nt
	Secretary of State use only
1. (6	IDANO SECRETARY OF STATE