



CERTIFICATE OF ASSUMED BUSINESS NAME

05 DEC -7 AN II: 33

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECTRE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

Baskin-Robbins State Street	
The true name(s) and business address(e business under the assumed business name	es) of the entity or individual(s) doing me: Complete Address 11835 W. Dallan Drive Boise, ID 83713
3. The general type of business transacted under the second secon	n and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: 4740 W. State Street Boise, ID 83703	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above): 	
	Secretary of State use only
Signature: Kimberly A Farmer	IDAHO SECRETARY OF STATE 12/07/2006 05=00 1 8 25, 90 = 35
Capacity/Title: Secretary (see instruction # 8 on back of form)	12/07/2006 05 = 00 CK: 2391 CT: 186500 BH: 1018199

UT NAME # 4

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