FILEL. L. LCTIVE CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO 00 NOV 24 AM 8: 37 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: Duntry Cuddles 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Monica D. Nelson 4080 Magnolia Dr Coeurd'Alene Idaho 83815 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining

4. The name and address to which future Phone number (optional): 665-2285 correspondence should be addressed:

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

Submit Certificate of Assumed Business Name and \$20.00 fee to:

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

SPRANTA SECRESTATE HESSERIE

11/24/2000 09:00 CK: 6400 CT: 138905 BH: 362864

1 @ 20.88 = 20.60 ASSUM NAME # |

D48143

Printed Name:

Capacity:

(see instruction # 8 on back of form)