

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFEC

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

-may 100 25 KM 9: 14

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: **Timberline Quilting** 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name P. O. Box 561 Victoria L. Guthrie 354 Main Street James W. Guthrie Elk City, ID 83525 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Submit Certificate of Services **Assumed Business** Manufacturing Mining Name and \$25.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 **Timberline Quilting** Boise ID 83720-0080 P. O. Box 561 208 334-2301 Elk City, ID 83525 Phone number (optional): 5. Name and address for this acknowledgment (208) 842-2544 CODV IS (if other than # 4 above): Secretary of State use only 128619 Signature: Lection Victoria L. Guthrie Printed Name: _ IDAHO SECRETARY OF STATE 02/25/2004 05:00 CK: 5863 CT: 158818 BH: 729279 Owner Capacity/Title:_ (see instruction # 8 on back of form) 25.00 ASSUM NAME # 2