

FILED/EFFECTIVE**CERTIFICATE OF ASSUMED BUSINESS NAME**

(Please type or print legibly)

00 APR -5 AM 8:45



To the SECRETARY OF STATE, STATE OF IDAHO
 Pursuant to Section 53-504, Idaho Code, the undersigned
 gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Creations By Day

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

NameComplete Address

Barbara A. Day

19B Spruce St. Mt Home AFB, ID
83648

3. The general type of business transacted under the assumed business name is:
 (mark only those that apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

4. The name and address to which future correspondence should be addressed:

Barbara A. Day

19B Spruce St.

Mt. Home AFB, ID 83648

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

Signature: Barbara A. Day

Printed Name: Barbara A. Day

Capacity: Sole Proprietor

(see instruction # 8 on back of form)

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

Secretary of State use only

IDAHO SECRETARY OF STATE

04/05/2000 09:00
 CX: 1013 CT: 129368 IN: 306061

1 @ 20.00 = 20.00 ASSUM NAME # 2

D34721

Revision 2/97

g:\corpforms\abn.png