

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 01 DEC 21 AM 9: 19 SEUNE ARY OF STATE STATE OF IDAHO

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

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The assumed business name which the undersigned business is: The Pocket	d use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the endusiness under the assumed business name: Name Wormo's Rackem and Crack emile Patricia M. Wormsbaker Carl A. Wormsbaker	Complete Address 1532 Kimberly Rd Twin Falls, Id 83301
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Pub Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Wormo's Rackem and Crackem LLC DBA The Pocket 1532 Kimberly Rd Twin Falls, Ide 83301 5. Name and address for this acknowledgment copy 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 Phone number (optional): (268) 733-9676
	Secretary of State use only
Signature: Patricia M. Worms baker 1000/10 per 1000/10	IDANO SECRETARY OF STATE 12/21/2001 05:00

1 8 20.00 = 20.00 ASSUM NAME # 2

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