## -CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) 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: KITCHEN KNEADS CENTER AND TREASURES GALORE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address

	<u>Name</u> G. KENT SEVERE	Complete Address 2126 OVERLAND AVE. BURLEY, IDA. 83318
	JUDY SEVERE	SAME
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)	
	Retail Trade	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future correspondence should be addressed:  SAME AS ABOVE  Phone number (optional):	
		Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgmen	Secretary of State 700 West Jefferson t Basement West
	COPY is (if other than # 4 above):  D.L. EVANS BANK	PO Box 83720 Boise ID 83720-0080 208 334-2301
	BOX 87	Secretary of State use only

TWIN FALLS, IDA.

(see instruction # 8 on back of form)

Printed Name: \_\_G. KENT SEVERE

OWNER

Signature:

Capacity:

83303

IDAHO SECRETARY OF STATE
11/14/2001 05:00
CK: 978711 CT: 24085 BH: 429417
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