D43784

Capacity: DwncV

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) Lan 22 I de PM Ini 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: Sweet Pear IL 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 Name 12014 WMesquite Dr Boise 1083713 tamela L. Phillips 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Minina Construction Services Phone number (optional): ___ 4. The name and address to which future correspondence should be addressed: Submit Certificate of Clo Pamela Phillips **Assumed Business** Name and \$20.00 fee to: 12014 w mesquite Dr Secretary of State Buse 1083713 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** PO Box 83720 CODY is (if other than #4 above): Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE Signature: Tunu la 03/22/2001 09:00 CK: 1682 CT: 143994 BH: 386388 1 0 20.00 = 20.00 ASSUM NAME # 2 Printed Name: Tame