



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:

SWEET LIPS

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>SHIRLEEN L. HILLS</u>	<u>1010 W. Highland View Dr. Boise</u> 83702
_____	_____
_____	_____

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 checked="" type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

Phone number (optional): _____

Shirleen L. Hills
1010 W. Highland View Dr
Boise ID 83702

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

Signature: Shirleen L. Hills

Printed Name: SHIRLEEN L. HILLS

Capacity: PRESIDENT/OWNER

(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

02/02/2001 09:00
CK: 1251 CT: 114385 BH: 376587

1 @ 20.00 = 20.00 ASSUM NAME # 2

D-42306

Revision 1/98

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