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CERTIFICATE OF ASSUMED BUSINESS NAME FLED (Please type or print legibly. See instructions on reverse.)			
To the SECRETARY OF STATE, STATE OF IDAHO IN 15 1 46 M '98 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name RETARY OF STATE			
1. The assumed business name which the undersigned use(s) in the transaction of business is:			
	<u>Country Creatio</u>	<u>ns</u>	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
Mich	<u>Name</u> ele wiles		Brus Ave . Boise ID 83709
	D WILES		Brune Ave. Baxe, 1D 83709
· · · · · · · · · · · · · · · · · · ·			
	eneral type of business trans tk only those that apply)	sacted under the assu	imed business name is:
<u></u> w	holesale Trade 🔲 Agric	culture 🗌 Fin	ansportation and Public Utilities ance, Insurance, and Real Estate ning
4. The name and address to which future Phone number (optional): correspondence should be addressed:			
Mich	ele wiles		Submit Certificate of Assumed Business
_6823	San Bimo Ave		Name and \$20.00 fee to:
Bas	e, 10 83709		Secretary of State 700 West Jefferson
	and address for this acknow	vledgment	Basement West PO Box 83720
	S (if other than # 4 above).		Boise ID 83720-0080 208 334-2301
			Secretary of State use only
		00/1	IDNHO SECRETARY OF STATE
Signature: _/	Inhile Wiles	Revision 1/88	05/15/1998 09:00 CK: CKSH CT: 907% HH: 111137
Printed Name: Michele Willes 8			
Capacity: <u>Sole proprietor</u> D14966			
(8	ee instruction # 8 on back of form)	Walacot 6	
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