



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned
submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2004 MAY 11 A 8:21
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Granny's Attie

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Karen Stevens

1760 Peregrine Dr., MT. Home, ID 83647

Kayle Hoffman

1760 Peregrine Dr., MT. Home, ID 83647

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Karen Stevens

1760 Peregrine Dr.

Mountain Home, ID 83647

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

Kayle Hoffman

1760 Peregrine Dr.

Mountain Home, ID 83647

Signature:

Karen Stevens / Kayle Hoffman
(signature required)

Printed Name:

KAREN STEVENS / Kayle Hoffman

Capacity/Title:

CO-OWNER - CO-OWNER

(see instruction # 8 on back of form)

Phone number (optional):

Secretary of State use only

076186

IDAHO SECRETARY OF STATE
05/11/2004 05:00
CK: 1004 CT: 150010 BH: 744312
1 @ 25.00 = 25.00 ASSUM NAME # 2