CERTIFICATE OF ASSUMED BUSINESS NAME

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

2004 NOV 10 PM 2: 12

STATE OF WAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned use(s) in the transaction of business is: Come, N Look Distributors	
2. The true name(s) and business address(es) of the elements business under the assumed business name: Name Linda Cohurn Nicolk Stimpson 212 0	entity or individual(s) doing Complete Address 3rd Avr N Nampa ID 83/81 uai I St. McIba IN 83/64
3. The general type of business transacted under the assumed business name is:	
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
Nicola Stimpson 212 Quail St. Melba IN 83641	PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than #4 above):	Phone number (optional):
	Secretary of State use only
Signature: Wicolk Stimpson Printed Name: Nicolk Stimpson Capacity/Title: + Out + Oct (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 11/10/2004 05 # 00 CK: 2824 CT: 158018 BN: 775911 1 8 25.88 = 25.88 ASSUM NAME # 2

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