

CERTIFICATE OF ASSUMED BUSINESS NAME

FLED/EFFECTIVE

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

02 JAN 23 AM 8: 48

Please type or print legibly.

NOTE: See instructions on reverse before filing.

STATE OF TO HATE

1. The assumed business name which the undersig business is: Ozy Wear St	ned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name Autor FRAES Home	entity or individual(s) doing Complete Address 19 - Box 43 \(\frac{13}{2} \) MeLba, JD 83647
3. The general type of business transacted under the Retail Trade Transportation and F Wholesale Trade Construction Services Agriculture Manufacturing Mining	
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
MeLba ID 8369 / 5. Name and address for this acknowledgment	Boise ID 83720-0080 208 334-2301 Phone number (optional):
COPY is (if other than # 4 above).	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 01/23/2002 05:00 18 28 88 156129 BH: 44664
(see instruction # 8 on back of form)	1 0 20.00 = 136129 BH: 441664 20.00 ASSUM NAME # 2

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