CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned submits for filling a certificate of Assumed Business Name.

Pursuant to Section 53-304, tuano submits for filing a certificate of Assumed Bu	usiness Name	SELSTATE OF TOAHO	i
Please type or print legibly. NOTE: See instructions on reverse before		SIAIL	
The assumed business name which the und business is: UGLEEZ	lersigned u	se(s) in the transaction of	
2. The true name(s) and business address(es) business under the assumed business nam Name ELDORA M. GATCHELL MARY NATARIA	P.O. BO 3807 W.S	Complete Address X 1739 BUNNERSFERRY SKERRA HWY#6, PMB4377 CA	1083305 Actor), 93610
The general type of business transacted under the assumed business name is:			
Retail Trade	e -	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 Phone number (optional): 208 267-6133	
	_	Secretary of State use only	
Signature: Clark Chiqueture regulated) Printed Name: ELDORA TVI, GATCHEU Capacity/Title: OWNER FARTNER (see instruction # 8 on back of form)	g konptomwisen komaken p65 Revised 04/2003	IDAHO SECRETARY OF STATE @3/08/2006 @5:00 CK: 746159 CT: 172099 BH: 942060 1 8 25.00 = 25.00 ASSUN NAME # 2	