CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO ^{M3} SEP -2 AM 9:01 Pursuant to Section 53-504, Idaho Code, the undersigned	
gives notice of adoption of an Assumed Business Name	
 The assumed business name which the undersigned use(s) in the tlansaction of business is: 	
Kristi Ryan Creations	
 The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: 	
Name	Complete Address
Debra M. Bischoff	10909 N. Danielle Rd.
	tayden, Idano - 83835
3. The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining	
4. The name and address to which future Phone number (optional): <u>208-772-73</u> 82 correspondence should be addressed:	
Debra Bischoff	
10909 N. Danielle Rd.	Submit Certificate of Assumed Business
Houden Idain Brook	Name and \$29:00 fee to:
10yuur - 10ano - 103835	Secretary of State
5. Name and address for this acknowledgmer	nt 700 West Jefferson Basement West
copy is (if other than # 4 above):	PO Box 83720
	Boise ID 83720-0080 208 334-2301
	Secretary of State use only
	DERAGO
Signature: Debla, MI BUChilt	
Printed Name: Debra M. Bischoff	IDAHO SECRETARY OF STATE 8 09/02/2003 05 = 00
Capacity: Owner	92 09/02/2003 05:20 GCK: 2463 CT: 156018 BH: 699266 I 25.00 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	corpMor
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