CERTIFICATE OF ASSUMED BUSINESS NAME STATE OF DAHLAGE (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Lovers Revenge 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name Michele Dawn Ash 2131 E Hone gakle Ave Hayden Idaho 838 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Transportation and Public Utilities Manufacturing Finance, Insurance, and Real Estate Wholesale Trade Agriculture Services Construction Mining 4. The name and address to which future Phone number (optional): _____ correspondence should be addressed: Lovers Revenge Submit Certificate of Assumed Business Po Box 2182 Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 · Michele Ash 208 334-2301 2131 E Norgerick le Ave Hayden, Folaho 83835 Signature: Weichel Goh Secretary of State use only IDANG SECRETARY OF STATE Ø1/24/2000 09:00 CK: 5545 CT: 125593 BH: 283639 Printed Name: Michele Q Ash 1 0 20.00 = 20.00 ASSUM MAME # 2 Capacity: Own / Ausident D32463

(see instruction # 8 on back of form)