

(see instruction # 8 on back of form)

ASSUMED BUSINESS NAME

2006 HAR - 2 AM 9: 02

FILED EFFECTIVE

MONTH OF UNIT

097058

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:	
THE SHOP AROUND THE	CORNER
The true name(s) and <u>business</u> address(es) of the obusiness under the assumed business name: <u>Name</u>	entity or individual(s) doing <u>Complete Address</u>
Deb Majeran 71	17 N. Pond St. Boke, ID 83706
3. The general type of business transacted under the	assumed business name is:
Retail Trade Transportation and Pu Wholesale Trade Construction	iblic Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Deb Majeran 117 N. Pond St. Boise 10 83706	Secretary of State 700 West Jefferson Basement West 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): 336-6657
	Secretary of State use only
Signature: DEB VALTERAN Capacity/Title: CANALTERAN	IDAHO SECRETARY OF STATE 23/22/2006 25:200 CK: 1180 CT: 197510 BH: 940627 1 0 25.00 = 25.00 ASSUM NAME #