

CERTIFICATE OF ASSUMED BUSINESS NAME

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

O7 SEP 12 AM 8: 50 SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

Crea	ative Addictions
The true name(s) and business address business under the assumed business r Name	name:
Larry Scott Weber	Complete Address 276 E Chapparosa Dr. Kuna, ID 83634
Martie Weber	<u> </u>
iviartie vveber	276 E Chapparosa Dr Kuna, ID 83634
3. The general type of business transacted	d under the assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
ignature: / / / / / / / / / / / / / / / / / / /	Secretary of State use only
Capacity/Title: Owner	- 8