

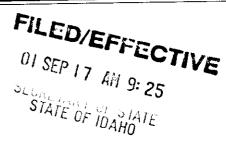
CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)



1. The assumed business name which the undersigned use(s) in the transaction of business is: **Inc Child Time Child Company**	
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Or waste Address.	
CHARLES R. DAVIS YO DO	Complete Address 68 890 Mc CALL, ID, 85638
GRETCHEN O. BATES	SAME
3. The general type of business transacted under the assumed business name is:	
Retail Trade Transportation and Pul Wholesale Trade Construction	blic Utilities
Services Agriculture	Submit Certificate of Assumed Business
ManufacturingMiningFinance, Insurance, and Real Estate	Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson
AJ ABOVE	Basement West PO Box 83720 Boise ID 83720-0080
	208 334-2301
5. Name and address for this acknowledgment	Phone number (optional):
copy is (if other than # 4 above):	208-634-6035
AT ADOVE	Secretary of State use only
Signature:	
Printed Name: HAALES A. DAVIJ	IDAHO SECRETARY OF STATE @9/17/2001 05:00 Ck: 2366 CT: 151333 BH: 419426
Capacity: OWNER	28.90 = 28.00 ASSUM NAME # 2