

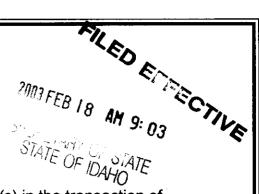
CERTIFICATE OF ASSUMED BUSINESS NAME

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 undersigne business is: Sunny farm	ed use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the education business under the assumed business name: Name Pamela Abbott - Brookes R. A.	Complete Address
3. The general type of business transacted under the Retail Trade	
4. The name and address to which future correspondence should be addressed: Pamela Abbett - Brooker Pirit Box 2510 Bonners Ferry ID, 83805 5. Name and address for this acknowledgment	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
copy is (if other than # 4 above):	<u> 208-267 - 2</u> 878.
Signature: Panel Abbott Brooker, Capacity/Title: Owner.	Secretary of State use only IDAHO SECRETARY OF STATE 02/18/2003 05:00 CK: 192 CT: 158010 BH: 663232 1 0 20.00 = 20.00 ASSUM NAME # 2

DU2003