CERTIFICATE OF ASSUMED BUSINESS N Pursuant to Section 53-504, Idaho Code, the un submits for filing a certificate of Assumed Busin Please type or print legibly. NOTE: See Instructions on reverse before fi	ess Name. SECRETARY OF STATE
1. The assumed business name which the unders business is: Scent Sens	signed use(s) in the transaction of
2. The true name(s) and business address(es) of business under the assumed business name: Name Deborah R Parker	the entity or individual(s) doing Complete Address PO Box 1042 Hailey, ID 83333
3. The general type of business transacted under Image: Provide the state Image: Provide the state	
5. Name and address for this acknowledgment copy is (if other than #4 above):	Secretary of State use only
Signature: <u>Jubbit</u> <u>(spontum required)</u> Printed Name: <u>Deborah R Parker</u> Capacity/Title: <u>Owner</u> (see instruction # 8 on back of form)	10440 SECRETARY OF STA 10/01/2007 05 CK: 2056 CT: 150016 BH: 1 1 25.60 = 25.00 ASSUM