| CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse)  |   |
|---|---|
| To the SECRETARY OF STATE, STATE OF IDAHO STATE OF STATE OF IDAHO |   |
| The assumed business name which the undersigned use(s) in the transaction of business is:   |   |
| WRAP AWAY INCHES  |   |
| The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:   |   |
|   | Latch, Rathdryand 83858   |
| Lee J. Fisher 1547 L  | ntel, Rathdrum, Id 838 58                                       |
|   |   |
| 3. The general type of business transacted under the assumed business name is:  |   |
| Retail Trade Manufacturing Transportation and Public Utilities  Wholesale Trade Agriculture Finance, Insurance, and Real Estate  Services Construction Mining   |   |
| 4. The name and address to which future Phone number (optional): (208) 687-0944 correspondence should be addressed:   |   |
| Rita Fisher<br>1547 Lateh   | Submit Certificate of Assumed Business Name and \$20.00 fee to: |
| RATHDRUM, Id. 83858   | Secretary of State 700 West Jefferson                           |
| 5. Name and address for this acknowledgment copy is (if other than # 4 above):  | Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301     |
|   | Somerecht bindense imp  |
| Ravision 2/97   | 01/15/1998 09:00<br>CK: NO CK # CT: 92667 BH: 73218             |
| Signature: The factor   | 1 8 28.88 = 28.88 ASSUM NAME                                    |
| Printed Name: Rta FISher  | D 11229   |

(see instruction # 8 on back of form)