

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See Instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO **FILED EFFECTIVE**

Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name.



1. The assumed business name which the undersigned uses(s) in the transaction of business is:

Kostik Clothing

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>Justin Stephenson</u>	<u>578 N Idaho St # 45 Post Falls, ID 83854</u>
<u>MAX DICKERSON</u>	<u>305 W. 18th AVE Post Falls, ID 83854</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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 correspondence should be addressed: Phone number (optional): _____

MAX DICKERSON

305 W. 18th AVE.

Post Falls, ID 83854

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and ~~\$25.00~~ fee to:
~~25.00~~

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: Max Dickerson

Printed Name: MAX DICKERSON

Capacity: PARTNERS (2)

(see instruction # 8 on back of form)

Revision 2/97
g1000form1001b1006

IDAHO SECRETARY OF STATE
07/12/2006 05:00
CK: 5036 CT: 202278 BH: 964499
10 25.00 = 25.00 ASSUM NAME # 2

D 101696