



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECT

2004 MAY 26 AM 9:00
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

LUPINE GIFTS

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

Name	Complete Address
<u>SYLVAN TRACE LLC</u>	<u>2115 Pinto, POC, ID 83701</u>
<u>W 30356</u>	

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

4. The name and address to which future correspondence should be addressed:

SYLVAN TRACE LLC
d/b/a: Lupine Gifts
2115 Pinto, POC, ID 83701

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:

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

Phone number (optional):

208-237-7867

Signature: William E Kuttler
(signature required)

Printed Name: William E Kuttler

Capacity/Title: Owner / President
(see instruction # 8 on back of form)

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Secretary of State use only

IDAHO SECRETARY OF STATE
05/26/2004 05:00
CK: 9593 CT: 89490 BH: 747203
1 @ 25.00 = 25.00 ASSUM NAME # 2

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