Capacity:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO 11 16 AM 'NO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name RETIFY OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is: LEAVES OF LOVE - ART-N-ANTIGNES 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: BEATRICE M. PETERSON 297 S. Elm AVE #206, 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 Phone number (optional): (208) 331-3749 4. The name and address to which future correspondence should be addressed: BEATRICE M. TETERSON Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 SORPOTABLICATE PARTO (\$25 TATE) 07/25/2666 69:00 CK: 1680 CT: 133957 BH: 336093 Signature: DiaTru 1 # 20.00 = 20.00 ASSUM NAME # 2 Printed Name: DEATRICE /VI