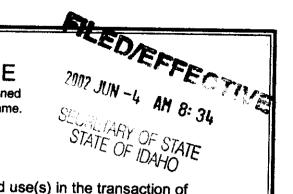


CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.



NOTE: See instructions on reverse be	efore filing. STATE OF IDAHO
The assumed business name which the business is: ESSENCE of full Continues the second of the seco	undersigned use(s) in the transaction of
The true name(s) and <u>business</u> address(e business under the assumed business name Name Semm/ek	es) of the entity or individual(s) doing time: Complete Address M. Stanfus Baise, ID 0 83706
3. The general type of business transacted Retail Trade Transportati Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estat	ion and Public Utilities in Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: LISA Simmles The No. Stanley	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301