

CERTIFICATE OF ASSUMED BUSINESS NAME

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



To the SECRETARY OF STATE, STATE OF IDAHO

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 use(s) in the transaction of business is:

THE SOLAR CLOW

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 SIMPLE PLEASURES HANDMADE SOAP LLC (W-13167) Complete Address 3366 SHADY GLEN, IDAHO FALLS, ID 83404

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

<input checked="" type="checkbox"/> Retail Trade	<input checked="" type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input checked="" type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

Phone number (optional): (208) 542-1518

NEEDON W. JACKSON

3366 SHADY GLEN

IDAHO FALLS, ID 83404

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

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

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

Secretary of State use only

028574

IDAHO SECRETARY OF STATE
09/04/2003 05:00
CK: 1040 CT: 150010 BH: 699834
1 @ 25.00 = 25.00 ASSUM NAME # 2

Signature: N.W. Jackson

Printed Name: NEEDON W. JACKSON

Capacity: PRESIDENT

(see instruction # 8 on back of form)