

## 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:

Ambiance Wedding and Event Coordinators

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

Christina Dammerman

P.O.B. 550 McCall, ID 83638

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

Retail Trade  
 Wholesale Trade  
 Services

Manufacturing  
 Agriculture  
 Construction

Transportation and Public Utilities  
 Finance, Insurance, and Real Estate  
 Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 634-4482

Ambiance % Christina Dammerman  
P O B 550  
McCall, ID 83638

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

Signature: Christina Dammerman

Printed Name: Christina Dammerman

Capacity: Sole Proprietorship

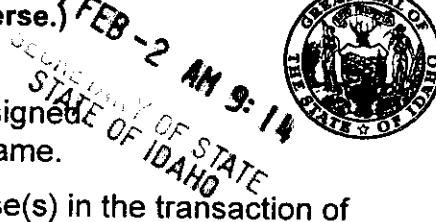
(see instruction # 8 on back of form)

Revision 2/97

G:\corporation\pm6

IDAHO SECRETARY OF STATE  
02/02/2001 09:00  
CK: 1121 CT: 141788 BH: 376688  
1 @ 20.00 = 20.00 ASSUM NAME # 2

1 - 42332



FILED/EFFECTIVE