CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO 00 001 16 AM 9: 42 Pursuant to Section 53-504, Idaho Code, the undersigned

gives notice of adoption of an Assun 1. The assumed business name which the unders business is: Hip Gifts	STATE OF HIGHT
2. The true name(s) and business address(es) of business under the assumed business name is Name Harleysha (1)e66	• • • • • • • • • • • • • • • • • • • •
3. The general type of business transacted under (mark only those that apply) Retail Trade Manufacturing	
☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	Transportation and Public Utilities Finance, Insurance, and Real Estat Mining
4. The name and address to which future Phon correspondence should be addressed:	e number (optional): <i>208_3</i> 77 <i>0639</i>
4007 Vera	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
12/99	Secretary of State use only IDAHO SECRETARY OF STATE
Signature: Warlanda Block	10/16/2006 09:06 CK: 6162322114 CT: 137268 BH: 354819 1 @ 28.88 = 28.88 ASSUM NAME # 2
Printed Name: Har leysha Webb Sapacity: Wesident Jouner	D39709
Capacity: OKESI GENT / OKNER	

(see instruction # 8 on back of form)