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

Pursuant to Section 53-504 gives notice of adoption of a 1. The assumed business name which the business is:	an Assumed Business Name. e undersigned use(s) in the transaction of
Gone To Pot	S S S
The true name(s) and business address business under the assumed business <u>Name</u>	S(es) of the entity or individual(s) deline
Neva W. Reedy	405 Nevada St. Goodi (6, ID 83330
The general type of business transacted (mark only those that apply)	d under the assumed business name is:
Retail Trade	Finance, Insurance, and Real Est
 The name and address to which future correspondence should be addressed: Nan Reedy 	Phone number (optional): 934-4640
405 Nevada St.	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Gooding, Id 83330 5. Name and address for this acknowledge copy is (if other than # 4 above): same	Secretary of State 700 West Jefferson nent Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
gnature: Llw Weeky	IDAHO SECRETARY OF STATE 99/12/2000 09:00 CK: 837 CT: 135851 BH: 347617
apacity: owner/operator	1 0 20.00 = 20.00 ASSUM NAME # 2

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