CERTIFICATE OF ASSU	INIED BUSINESS NAME 1. L. 26 AM 9: 34
to the SECRETARY OF STATE, STATE OF	
The assumed business name which the u business is:	ndersigned use(s) in the transaction of
2. The true name(s) and business address(e business under the assumed business national Name Shannon Evans	es) of the entity or individual(s) doing time is/are: Address 107109 W. Hospector Cascacle, Fel P3611
	P.U. BOX 849
3. The general type of business transacted to Retail Tradl See categories on the reverse	· · · · · · · · · · · · · · · · · · ·
4. The name and address to which correspondence of the corresponde	
Signed >	Shannon Evans Azsident / numer Shannon Evans Y owner
Submit Certificate of Assumed Business Name and \$20.00 fee to:	Customer#
Secretary of State 700 West Jefferson PO Box 83720 Boise ID 83720-0080	Secretary of State use only Secretary of State use only Secretary of State use only Secretary of State use only IDAHO SECRETARY OF STATE 107/26/2002 05 = 200 CK: 1773 CT: 150010 BH: 479344 1 0 20.00 = 20.00 ASSUM NAME # 2