



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE
2003 SEP 10 AM 8:47
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

DISTINCTIVE POTS & DESIGN

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

KELLY DUREN

DEBBIE GUINN

Complete Address

1021 E. GROUSE DR MERIDIAN, ID 83642

512 CREEKSIDE CT NAMPA, IDAHO 83686

3. The general type of business transacted under the assumed business name is:

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

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

KELLY DUREN

1021 E. GROUSE DR.

MERIDIAN, ID 83642

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

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

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

Phone number (optional):

(208) 887-3670

Secretary of State use only

Signature: *Kelly Duren*

(signature required)

Printed Name: KELLY DUREN

Capacity/Title: PARTNER

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
09/10/2003 05:00
CK: 3830 CT: 158010 BH: 700916
1 @ 25.00 = 25.00 ASSUM NAME # 2

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