



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:

COUNTRY CREATIONS, P.O. Box 115
or 45 N. Center

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

Carolyn Heaton 45 N. Main or P.O. Box 115
Malta, Idaho, 83342

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

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

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

Carolyn Heaton
PO Box 115
Malta ID. 83342
208.645.2264

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

THIRD SECRETARY OF STATE

01/02/2001 09:00
 CK: 646 CT: 148281 BH: 378221

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: Carolyn Heaton

Printed Name: Carolyn Heaton

Capacity: owner & operator

(see instruction # 8 on back of form)

Revision 12/99

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