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



To the SECRETARY OF STATE, STATE OF IDAHO 7 SEP -3 ALL 8: 28 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name STATE OF IDAHO	
1. The assumed business name which the undersigned use(s) in the transaction of business is:	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
<u>Name</u> Kâren Gabiola	Complete Address 22/3 PISCES DE NAMA ID 83651
The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade Manufactur Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
4. The name and address to which future Phone number (optional): 467-1050 correspondence should be addressed:	
2313 PISCES DELLE NAMPA, IDAHO 83651	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledge copy is (if other than # 4 above).	Secretary of State 700 West Jefferson ment Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IDANO SECRETARY OF STATE 99/03/1997 09:00

Signature: San Gaziola

Printed Name: Friend Gaziola

Capacity: OWNER

(see instruction # 8 on back of form)

1 9 20.00 = 20.00 ASSUM NAME

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