Capacity:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINES NAME (Please type or print legibly. See instructions on reverse.) 00 MAY -4 PM 2: 02 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 13 APE OF IDAHO 1. The assumed business name which the undersigned use(s) in the transaction of business is: EYE CANDY GEMS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: **Complete Address** Name M. JAY SMITH 8868 W. CAMERBURY DR. BOIS, 70 83704 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Construction Services Mining 4. The name and address to which future Phone number (optional): 208-870-2818 correspondence should be addressed: SYE CANDY GEMS Submit Certificate of 8868 W. CAMERBURY DR. Assumed Business Name and \$20.00 fee to: BOISE, ID 83704 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE **45/44/2004 49:40** CK: none CT: 130625 BH: 314988 Signature:__ 1 e 20.00 = 20.00 ASSUM NAME # 2 Printed Name: M. JAY SMITH D 35523