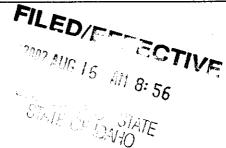


CERTIFICATE OF ASSUMED BUSINESS NAME

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.



| | | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ |
|---|--|--|
| The assumed business name which the und business is: | ersigne | d use(s) in the transaction of |
| · TAYLOR'S TREASURES | | |
| The true name(s) and <u>business</u> address(es) business under the assumed business name: Name | | ntity or individual(s) doing Complete Address |
| | Pn. R | OX 598 MIDDLETON ID 83644 |
| 3. The general type of business transacted und | | |
| 5. The general type of business transduced unc | | assumed business name is. |
| Retail Trade Transportation Wholesale Trade Construction | and Put | olic Utilities |
| Services Agriculture | | Submit Certificate of |
| Manufacturing Mining | | Assumed Business |
| Finance, Insurance, and Real Estate | | Name and \$20.00 fee to: |
| 4. The name and address to which future | | Secretary of State |
| correspondence should be addressed: | | 700 West Jefferson |
| | | Basement West |
| Coeina M. Guinn | | PO Box 83720 Boise ID 83720-0080 |
| P.O. Box 598 | | 208 334-2301 |
| MIDDLETON, ID 83644 | | |
| 5. Name and address for this acknowledgmen | nt | Phone number (optional): |
| COPY IS (if other than # 4 above): | | |
| SAME AS ABOUE | | |
| | • | Secretary of State use only |
| | n.p65 | |
| Signature: Coura M. June | as co | |
| (signature required) | 35n for | IDAHO SECRETARY OF STATE 88/16/2002 95:00 |
| Printed Name: CORINA M. GUINA | Vormstabn forn Revised 07/2002 | CK: 1470 CT: 158810 BH: 483116 1 9 28.80 = 28.80 ASSUM NAME N 2 |
| Capacity/Title: OwnER | g: corp/forms/abn.p65 Revised 07/2002 | ÷ 171110 |
| (see instruction # 8 on back of form) | • | 1)5/414 |