## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See Instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO 30 AN ID: 29 Pursuant to Section 53-504, Idaho Code, the undersigned TE gives notice of adoption of an Assumed Business Hamalio 1. The assumed business name which the undersigned use(s) in the transaction of business is: MEMORY MAKERS 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 GLENNA TOOMAN 9116 HALSTEAD 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Manufacturing Retail Trade Finance, Insurance, and Real Estate Agriculture Wholesale Trade Construction Mining **Services** Phone number (optional): (208) 375-4448 4. The name and address to which future correspondence should be addressed: LENNA TOOMAN Submit Certificate of Assumed Business 9116 HALSTEAD DR. Name and \$20.00 fee to: BOISE, ID 83704 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Resement West** PO Box 83720 CODY is (if other than # 4 above): Boise ID 83720-0080 SAME as above 208 334-2301 Secretary of State use only . IBAHD SECRETARY OF STATE 01/29/1998 09:40' CK: 511 CT: 934% N: 77%2 Signature: Denna Dooman 1 # 20.00 = 20.00 ASSUM NAME Printed Name: Glenna Tooman 1711677 Capacity: Surer (see instruction # 8 on back of form)