(see Instruction #8 on back of form)

FILED/EFFECTIVE

| CERTIFICATE OF | |
|---|--|
| ASSUMED BUSINESS | 7002 SEP 25 AN 8 28 |
| Pursuant to Section 53-504 Idaha Code than | |
| Subtrities for filling a certificate of Assumed Business | ndersigned AV AND ATE ness Name. |
| Please type or print lealby | |
| NOTE: See instructions on reverse before filing. | |
| 1. The assumed business name which the under | |
| The assumed business name which the undersigned use(s) in the transaction of business is: | |
| - PRECIOUS HROMAS | |
| | |
| The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: | |
| Name | 袋 🌷 |
| BRENDA T Ziegler | Complete Address |
| <u> </u> | 740 RUKSTEN |
| | MUT HOME, TO |
| | 83647 |
| 3. The general type of business transacted under the assumed business name is: | |
| Retail Trade Transportation and Public Utilities | |
| Wholesale Trade Construction | A FUDIC Utilities |
| Services Agriculture | |
| ☐ Manufacturing ☐ Mining | Submit Certificate of Assumed Business |
| Finance, Insurance, and Real Estate | Name and \$20.00 ide to: |
| 4. The name and address to which future | |
| correspondence should be addressed: | Secretary of State 700 West Jefferson |
| BRENDA TIERLEY | Basement West |
| 144D Kurston | PO Box 83720 Boise ID 83720-0080 |
| MH TO 83640 | 208 334-2301 |
| | |
| Name and address for this acknowledgment copy is (if other than # 4 above): | Phone number (optional): |
| oopy is (ii other than # 4 above). | 208-587-6004 |
| | . 50 Pr |
| | Secretary of State use only |
| | |
| Signature: TMMQQ WS I | 19 1 1 1 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 |
| Printed Name: BRENDA ZIEGLEY | IDAHO SECRETARY OF STATE |
| Charles 21 Great | 09/25/2002 05:00 CK: 1830 CT: 158819 RM: 498186 |
| Capacity/Title: | 1 8 20.00 = 20.00 ASSUM MANE # 2 |