

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

04 DEC 30 Att 9: 10

SECRET OF STATE

submits for filing a certificate of Assumed Business Name. Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

1. The assumed business name which the ubusiness is:	A
Morning Cast Handwa	od Floures
2. The true name(s) and business address(e business under the assumed business national Name Mokning Cast Hardward Floor	Complete Address
Brent Bosse	Nampy ID 836BE
3. The general type of business transacted to Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Brent Bosse 2710 S. Har book Sfrings Strans	on and Public Utilities Submit Certificate of Assumed Business
5. Name and address for this acknowledgm copy is (if other than # 4 above):	nent Phone number (optional):
	Secretary of State use only
Signature: Signature is signature is equired) Printed Name: Brewt Bosse Capacity/Title: Owner / Proprietor	1DAHO SECRETARY OF STATE 12/34/2034 05:00 CK: 2572 CT: 184766 BH: 784749

1 9 25.00 = 25.00 ASSUM NAME # 3