Printed Name: TINA

Capacity/Title: //w/1e/

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2004 APR -8 AM 8: 42

STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

| The assumed business name which the undersigned use(s) in the transaction of business is: Women EntrePreneurs | |
|--|---|
| 2. The true name(s) and business address(es) of the business under the assumed business name: Name | entity or individual(s) doing Complete Address 39 W. Florence Ln, Boise III 837/3 |
| The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction | |
| Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| 4. The name and address to which future correspondence should be addressed: Women Entrepreneurs 1133 9 w. Florence Land 30167 Id 83713 | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgment copy is (if other than # 4 above): | Phone number (optional): |
| Signature: And A. Anho D | Secretary of State use only |

IDAHO SECRETARY OF STATE

04/08/2004 05:00

CK: 1135 CT: 158010 BH: 738116

1 0 25.00 = 25.00 ASSUM NAME # 2