CERTIFICATE OF FILED EFFECTIVE ASSUMED BUSINESS NAME

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

2007 MAY -3 AM 11: 26

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

	STATE OF IDAHO
The assumed business name which the unbusiness is:	
All Creatures Great and =	small Educational Exhibits
The true name(s) and business address(es business under the assumed business name to business name to business name to business.	me:
Name	Complete Address
Jennifer Hamilton	57 Lone Pine Rd
	Cocolalla, ID. 83813
3. The general type of business transacted un	nder the assumed business name is:
☐ Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ Construction	n and Public Utilities
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:	Secretary of State 700 West Jefferson Basement West
All Contures Groat + Small Educational Ex Do. Box 1015	
Cocolalla, ID: 83813	
5. Name and address for this acknowledgment	10
COPY IS (if other than # 4 above):	(208) 263-2934
	Secretary of State use only
	 5
Signature: Junif Manutta	borneladon.
Printed Name: <u>Jennifer Hamilton</u>	IDAHO SECRETARY OF STATE ##################################
Capacity/Title: Oune C	CK: 1433 CT: 158918 BH: 1951413 1 9 25.88 = 25.86 ASSUM NAME # 2
(see instruction # 8 on back of form)	D111066