CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on regar FFECTIVE To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned ALJUL 25 AM 9: 11 gives notice of adoption of an Assumed Business Name. SIAIL 1. The assumed business name which the undersigned use(s) in the transaction of FIDAHO business is: LOP NOTCH GIFTS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address David K Livingston 1680 Calkins #3; Idaho Falls Briana Livingston SAME AS ABOUE 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining Phone number (optional): (208)535-1030 4. The name and address to which future correspondence should be addressed: David K Livingston Submit Certificate of Assumed Business 1680 Calkins #3 Name and \$20.00 fee to: Idaho Falls, ID 83402 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above). PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only

Printed Name: David K Livingston Capacity: Owner

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE 07/25/2001 05:06 CK: 1976 CT: 149237 BH: 489713 8 28.00 = 20.00 ASSUM HAME #

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