



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

09 JUN 15 AM 9:41

Please type or print legibly.
NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Simple Indulgence of Twin Falls

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Erika Willsey

1242 Silver Creek Way Twin Falls, ID 83301

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

4. The name and address to which future correspondence should be addressed:

Erika Willsey

1242 Silver Creek Way

Twin Falls, ID 83301

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature:

Erika L Willsey
(signature required)

Printed Name:

Erika L. Willsey

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

Secretary of State use only

g:\corp\format\form\albn.p66
Rev/used 04/2003

IDAHO SECRETARY OF STATE
06/15/2009 05:00
CK: 2409 CT: 150010 DN: 1174744
1 @ 25.00 = 25.00 ASSUM NAME # 2

D131494