

CERTIFICATE OF ASSUMED BUSINESS NAME

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

09 APR -2 AM 10: 53

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

| business is: POCKAROOZ | e undersigned use(s) in the transaction of |
|---|--|
| The true name(s) and business address business under the assumed business Name | • • |
| Jennifer Spano | P.D. Box 140243- BOISE, ID 83714 |
| Vicki Weatherill | 8234 N. SUNDIAL BOISE, IN 83714 |
| 3. The general type of business transacte | ed under the assumed business name is: |
| Retail Trade Transport Wholesale Trade Construct Services Agricultu Manufacturing Mining Finance, Insurance, and Real Es 4. The name and address to which future correspondence should be addressed: Tennifer Spano P.O. BOX 140243 BOISE TO 83114 | Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street |
| 5. Name and address for this acknowled copy is (if other than # 4 above): | dgment |
| · · · · · · · · · · · · · · · · · · · | Secretary of State use only |
| gnature Jennifer Lpano (signature regimed) inted Name: JENNIFER SOANO | DANO SECRETARY OF STATE DANO SECRETARY O |