

FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

08 APR -3 AM 8:39
SECRETARY OF STATE
STATE OF IDAHO

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

With Love Floral and Gifts

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

Sallie Palleria

2511 Dorman Ave Caldwell ID 83605

Kimberly Bradshaw

2511 Dorman Ave Caldwell ID 83605

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

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

Sallie Palleria

1605 S Kimball Ave

Caldwell ID 83605

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

Secretary of State use only

Signature:

Sallie Palleria
(signature required)

Printed Name:

Sallie Palleria

Capacity/Title:

Managing Member 75%

(see instruction # 8 on back of form)

g:\corp\forms\abn forms\abn.p65
Revised 04/2003

P120552

IDAHO SECRETARY OF STATE
04/03/2008 05:00
CK: 5665 CT: 214164 BH: 1100118
1 @ 25.00 = 25.00 ASSUM NAME # 2