

RECEIVED AND FILED



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.

REC'D 05/17/2007 05:00

SEARCHED
SERIALIZED
FILED

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

Emporium Encores

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

Name

Business Adventures, Inc.

(C160286)

Complete Address

PO Box 204 Carmen, ID 83462

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 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:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Business Adventures, Inc. c/o Laura Hollingshead

PO Box 204

Carmen, ID 83462

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

Phone number (optional):

(208) 940-0282

Secretary of State use only

Signature Laura D. Hollingshead
(signature required)

Printed Name: Laura D. Hollingshead

Capacity/Title: President

(see instruction # 8 on back of form)

05/17/2007 05:00
CK: 1504 CT: 193537 BH: 1054535
1 @ 25.00 = 25.00 ASSUM NAME # 2