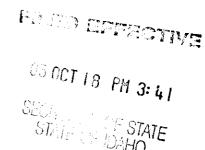


CERTIFICATE OF ASSUMED BUSINESS NAME

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.



 The assumed business name which the und business is: 	dersigned use(s) in the transaction of
Utopian Dreams.	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Lori kay Gibbs	
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	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
5. Name and address for this acknowledgment copy is (if other than # 4 above): 916 N. 5 th Stree7	nt Phone number (optional):
Boise Idaho 83702	Secretary of State use only
Signature: (signature required)	IDAHO SECRETARY OF STATE 10/18/2005 05:00 CK: 161 CT: 158010 BH: 917594 1 0 25.00 = 25.00 ASSUM MANE # 2
Printed Name: Lori Kay Gibbs	IDAHO SECRETARY OF STATE 10/18/2005 05:00 CK: 161 CT: 158010 BH: 917594 1 0 25.00 = 25.00 ASSUM NAME # 2
Capacity/Title:	D 92757
(see instruction # 8 on back of form)	0/0/0/