(see instruction # 8 on back of form)

FILEDSEFFECTIVE

CERTIFICATE OF ASSUMED BUSINESS NAME

2008 MAY 29 AM 11: 13

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

Please type or print legibly.

NOTE: See instructions on reverse pero	ore tiling.
The assumed business name which the unbusiness is:	
Harvest Dance a	nd Music
2. The true name(s) and business address(es business under the assumed business name Name Vista Cavanaugh	of the entity or individual(s) doing ne: Complete Address 124 W. Mullan Ave. Kellogg, ID 83837
3. The general type of business transacted un	nder the assumed business name is:
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: Krista Cavanaugh 124 W. Mullan Avc. Kellagg, ID 83837 5. Name and address for this acknowledgment	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
Krista Cavanaugh 124 W. Mullan Ave.	Secretary of State use only
Signature: Austa Caranavah Printed Name: Krista Cavanavah	IDAHO SECRETARY OF STATE 95/29/2008 95:00 CK: 115434 CT: 172099 BH: 1117265 1 0 25.00 = 25.00 ASSUM NAME # 8
Capacity/Title: Owner	CK: 115434 CT: 172099 BH: 1117265 1 0 25.00 = 25.00 ASSUM NAME # 2