

Capacity/Title: \(\lambda \text{Wnex}\)

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 06 JUN -5 PH 12: 47

Please type or print legibly.

NOTE: See instructions on reverse before filing.

NOTE: See instructions on reverse befor	SECHERAL OF STATE
The assumed business name which the unc	STATE OF DAHO
business is:	
- Prosey Kaboo	odle Enterprises
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name	ne: Complete Address
Jettry Norris Kim Norris	SAME. SAME.
3. The general type of business transacted und	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Dipsey Kaboodle Enterpri 5964 Filly St. Boise ID 83703	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	Secretary of State use only
Signature: Kon Moni (signature required)	IDAHO SECRETARY OF STATE ### OF CASE
Printed Name: Kin Noris	IDAHO SECRETARY OF STATE 96/05/2006 05:00 CK: 822519 CT: 172099 BH: 958382
Capacity/Title: \(\lambda\)\(\rangle\)	CK: 622519 CT: 172099 BH: 958382