	CERTIFICATE OF ASSUN (Please type or print legibly. S	MED BUS See instruction	SINESS NAME
	CERTIFICATE OF ASSUN (Please type or print legibly. S To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idah gives notice of adoption of an As	TE OF IDAHO no Code, the ssumed Busi	undersigned State of the season of the seaso
1.	The assumed business name which the unbusiness is:	dersigned us	e(s) in the transaction of Applica
	A Stitch in Time Co		J
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	STEVEN R. YOUNG 5.	65 E BRI	nplete Address  DG-V ST MINUALS 1 8344
	CARMEN YOUNG 5	65 E BR	IDEK ST. MIDUALE TO 83645
3.	The general type of business transacted un (mark only those that apply)  Commercial Sewing  Retail Trade Manufacturing  Wholesale Trade Agriculture  Services Construction	] Tre	med business name is: Insportation and Public Utilities ance, Insurance, and Real Estate ning
4.	The name and address to which future P correspondence should be addressed:	hone numbe	r (optional): 355-2365
	MIDUALE, TO 83695		Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	nt	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		96/1	Secretary of State use only  IMMO SECRETARY OF STATE
ignatu	ire: James Vous	Revision 1/98	05/25/1999 09:00 : 659566647 CT: 115988 BH: 219818
rinted	Name: CARMEN YounG	aten p65	1 9 29.90 = 29.90 RISSUM MARK TE
Capaci	ty: PART NER (see instruction # 8 on back of form)	orpWorms.labn.p65	