CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.	
1. The assumed business name which the undersigned use(s) in the transaction of the business is: Attitude Stitchin'	
2. The true name(s) and business address(states) business under the assumed business name Lilah Paul Paula G Knopp	es) of the entity or individual(s) doing ame is/are: Complete Address 430 Tami Dr. Burley ID BOX 901 Twin Folls ID 83301
3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining	
4. The name and address to which future correspondence should be addressed: Lilah Paul 430 Tami Dr Burley ID 83318	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson
 Name and address for this acknowledgm copy is (if other than # 4 above): 	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
D. L. EVANS BANK	Secretary of State use only
BURLEY, IDAHO 83318	
Signatura PAIP Paul	IDANO SECRETARY OF STATE 63/22/1999 89:00 CK: 35466 CT: 1935 BH: 199124
Signature: July 2011	1 8 20.00 = 20.00 ASSUM NAME # 2
Printed Name: LIIAN +OUI	D 24176
Capacity: CD - OLNEC	mond.