## 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 unfolersigned?

1. The assumed business name which the business is:  D&D Gifts	undersigned the (S) in the dransaction of
The true name(s) and business address business under the assumed business name      Name	(es) of the entity or individual(s) doing name is/are: <u>Complete Address</u>
David Holland	1223 N.W.16th St. 6pt 22 Fruitland, Id. 83619
The general type of business transacted under the assumed business name is:  (mark only those that apply)	
Retail Trade Manufactur  Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed:	
David Holland  1223 N.W. 1645st. sp. 42.2	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgme copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IDAHO SECRETARY OF STATE
Signature: David Hree and.	© 2/27/2001 09:00 CK: 2657 CT: 142789 BH: 381488 1 0 28.80 = 28.86 ASSUM NAME # 2
Printed Name: David Holland	
(see instruction # 8 on back of form)	D 42993