

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. EFFECTIVE 07 DEC 31 AM C

07 DEC 31 AM 8: 41

Please type or print legibly. NOTE: See instructions on reverse before filing. SECRETA OF STATE

	TOAHO
The assumed business name which the under business is:	ersigned use(s) in the transaction of
The Quilted Cilies	
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Jera L. Watson Greg M. Watson	Complete Address 1027 Newspate Drive Ammon, JTD 83406
3. The general type of business transacted und	der the assumed business name is:
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 208-552-07/9
	Secretary of State use only
Signature: Supering (signature required) Printed Name: Supering (signature required) Capacity/Title: See instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 12/31/2007 05:00 CK: 2302 CT: 158010 BH: 1091956 1 8 25.00 = 25.00 ASSUM HAME # 2