CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

W.	Pursuant to Section 53-504, Idaho Code, the gives notice of adoption of an Assumed Bus	ne undersigned
1.		use(s) in the transaction of
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:  Name  Complete Address	
	Karen M. Trujulo 8 434 2 Pocate	Halliday  10 Id 1200
3.	The general type of business transacted under the assumed business name is:  (mark only those that apply)	
	Vyhoiesale Trade	ransportation and Public Utilities nance, Insurance, and Real Estate ining
4.	The name and address to which future correspondence should be addressed:  Phone number (optional):	
	You're Stylin' 434 & Stylin' Poratello Id 83201	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
natu	E: Abrien 1268	Secretary of State use only

Sig

Printed Name: Karen Trus

Capacity: DUNCP

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

08/08/2002 05:00

CK: 109714 CT: 3663 BH: 481658
1 8 20.00 = 20.00 ASSUM HANE # 2

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