Capacity:_ OWNER

(see instruction #8 on back of form)

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 business is: business is: BASKETS AND MORE 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name P.O. BOX 636, KAMMAH, 10 83536 CORENE STOKES 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Transportation and Public Utilities Manufacturing Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining. 4. The name and address to which future Phone number (optional): ______ correspondence should be addressed: CORENE STOKES Submit Certificate of Assumed Business P.O. BOX 636 Name and \$20.00 fee to: KAMIAH, ID 83536 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment **Basement West** CODY IS (if other than # 4 above) PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE 06/24/1999 09:00 Signature: CORENE STOKES CK: 83572416944 CT: 117224 BH: 228514 1 8 20.00 = 20.00 ASSUM MANE # 2

