

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

THE FEB 17 AH 9: 24

STATE OF JOAHO

The assumed business name which the undersigned business is: Action NTERIORS	d use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the elements business under the assumed business name: Name PHILIP R. MARTIN 2599 MER.	ntity or individual(s) doing Complete Address N. SHOVELER WAY LIDIAN LOAHO 83642
3. The general type of business transacted under the a	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: PHILIP R. MARTIN 2599 N. SHOVELER WAY MERIPIAN, 10 83642	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 02/18/2004 05:00 CK: CASH CT: 158010 BH: 727863 1 @ 25.00 = 25.00 ASSUM NAME # 2