



CERTIFICATE OF ASSUMED BUSINESS NAME FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersigned **10 AUG 26 PM 1:31** submits for filing a certificate of Assumed Business Name.

Please type or print legibly.
Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Alturas Home

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

<u>Name</u>	<u>Complete Address</u>
<u>Picture Galleries, Inc.</u>	<u>P.O. Box 1000; Meridian, Idaho 83680</u>
<u>C98605</u>	<u></u>
<u></u>	<u></u>

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

11801 W. Executive Drive
Boise, Idaho 83713

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

11801 W. Executive Drive
Boise, Idaho 83713

Signature: 

Printed Name: Lance R. Saunders

Capacity/Title: President

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

0141712

IDAHO SECRETARY OF STATE
08/26/2010 05:00
CK: 55335 CT: 250722 BH: 1236456
1 @ 25.00 = 25.00 ASSUM NAME # 2