

FILED EFFECTIVE CERTIFICATE OF ASSUMED BUSINESS NAME 2004 OCT 25 41: 9: 15

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

STATE OF HOAHO

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

(see instruction # 8 on back of form)

NetStorm Marketing	
The true name(s) and business address(e business under the assumed business name	s) of the entity or individual(s) doing me: Complete Address 3310 Highlawn Drive, Twin Falls, ID 83301 3310 Highlawn Drive, Twin Falls, ID 83301
	n and Public Utilities
 ✓ Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed: Wendell and Laura Edwards 3310 Highlawn Drive Twin Falls, ID 83301	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than #4 above):	Phone number (optional): 208.733.1983
	Secretary of State use only
gnature: (signature required) Laura Edwards apacity/Title: Owner	Sod natural na

10/25/2004 05:00 CK: 2948 CT: 158010 BH: 772897 1 0 25.00 = 25.00 ASSUM NAME # 2