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.

08 MAY 12 PM 12: 38

SECRETARY OF STATE STATE OF IDAHO

Idaho Artistry		
2. The true name(s) and business address(es) of business under the assumed business name: Name Sharlene Stahl		ntity or individual(s) doing Complete Address N Arrow Crest Way, Boise, ID 83703
Retail Trade Transportation a Wholesale Trade Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: Sharlene Stahl		
5136 N Arrow Crest Way Boise, Idaho 83703		(208) 334-2301
5. Name and address for this acknowledgmen copy is (if other than #4 above):		Secretary of State use only
gnature: Stable Stable inted Name: Sharlene Stahl apacity/Title: President	griconplatemateticn formstelbn.p66 Revised 04/2003	IDAHO SECRETARY OF STATE 05/12/2008 05:00 CK: 2812 CT: 158610 BH: 11146 1 8 25.00 = 25.80 ASSUM MAME