CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAH **FILED/EFFECTIVE**Pursuant to Section 53-504, Idaho Code, the undersigned by the state of adoption of an Assumed Business Name.

1.	1. The assumed business name which the undersigned use(s) in the transaction of business is: HOVO SIGN ART		
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Name Complete Address		
	VOHN HORRELL 4472 KG	UNA RD KUNA ID 8364	
3.	The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade		
4.	The name and address to which future Phone number correspondence should be addressed: 4470 Kuna Rel Kuna ID 83634	Submit Certificate of Assumed Business Name and \$20.00 fee to:	
5 .	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West, Jefferson Basement West PO Box 83720 / Boise ID 83720-0080 208 334-2301	
gnati	ure: John Heurell	Secretary of State use only IDAHO SECRETARY OF STATE #2/14/2000 @9:00 CK: CASH CT: 126644 BH: 289768	

Sig

Printed Name: <u>JOHN</u> HORRELL

Capacity: OWNER

(see instruction # 8 on back of form)

J3308A