



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2003 OCT -6 PM 2: 15

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

HEARTH STYLE

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

Name

Complete Address

DEE L. MARTIN

2965 DEVONWOOD, AMMON, ID 83406

MICHELLE A. MARTIN

2965 DEVONWOOD, AMMON, ID 83406

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

- | | |
|--|--|
| <input checked="" 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 | |

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

DEE L. MARTIN

2965 DEVONWOOD

AMMON, ID 83406

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

Phone number (optional):

Secretary of State use only

Signature: Dee L. Martin

(signature required)

Printed Name: DEE L. MARTIN

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
10/07/2003 05:00
CK: 2988 CT: 158018 DH: 705261
1 @ 25.00 = 25.00 ASSUM NAME # 2

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