FILED CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name. 1. The assumed business name which the undersigned use(s) in the transaction of business is: SHADOWCATCHERS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Matthew 6 Schwank 3419 15th St Lewiston ID 83501 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Transportation and Public Utilities Retail Trade Manufacturing Wholesale Trade Agriculture Finance, Insurance, and Real Estate Construction Mining Services 4. The name and address to which future correspondence should be addressed: Submit Certificate of tthew 6 Schwank Assumed Business Name and \$20.00 fee to:

Lewiston ID 8350)

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

Secretary of State use only IDAHO SECRETARY OF STATE

G7/13/1999 G9:00 X: 1677 CT: 117966 NH: 233318

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Printed Name: Matthew 6 Schwank
Capacity: Ourse

(see instruction # 8 on back of form)

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