(see instruction # 8 on back of form)



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2005 SEP -6 AM 10: 21

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

SECRETARY OF STATE STATE OF TAXAD

1. The assumed business name which the under business is: Alpine Rustic L	og Furniture
	Complete Address 1151 E 1500 N Tdaho Faus ID 83402
3. The general type of business transacted under the last of the l	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
Jano Faus TD 83402 5. Name and address for this acknowledgment copy is (if other than # 4 above): 5ame	Phone number (optional): aos 5a45313 Secretary of State use only
Signature: David Reterson Capacity/Title: Open	Secretary of State use only