

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

2006 OCT 15 AMID: 37

SECRETAL OF STATE

The assumed business name which the undersigned use(s) in the transaction of business is: THO MAELSTRAM	
2. The true name(s) and business address(es) of the business under the assumed business name: Name 22 23	Complete Address Complete Address REALTST REA
3. The general type of business transacted under the Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: STUDIO MAELSTRAM 23 N. POSEVELT ST. BOSE ID 83700	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above). 	Phone number (optional): 208.409.9050
nted Name: Spantage required to the supplemental and the supplemental an	Secretary of State use only IDAHO SECRETARY OF STA

Capacity/Title: VOW (see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE 10/16/2006 05:00
CK: 1522 CT: 205483 BH: 988367
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