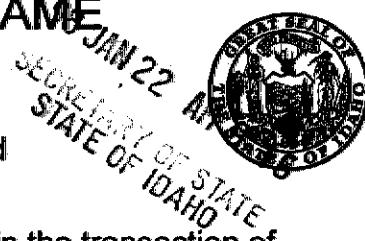


FILED

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

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:

ROCKY MOUNTAIN PHOTOGRAPHY

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

<u>Name</u>	<u>Complete Address</u>
<u>GOLDEN CHAD SNEDDON</u>	<u>P.O. Box 77, FAIRFIELD ID 83327</u>
<u>TAMARA PIKE SNEDDON</u>	<u>P.O. Box 77, FAIRFIELD ID 83327</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

P.O. Box 77
FAIRFIELD, ID 83327

5. Name and address for this acknowledgment

copy is (if other than # 4 above): Rocky Mt Photography

P.O. Box 980441
Park City, UT 84098

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

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

Signature: Tamara Sneddon

Printed Name: TAMARA PIKE SNEDDON

Capacity: OWNER

(see instruction # 8 on back of form)

Revision 297

01/22/1998 09:00
CK: 589 CT: 93020 BH: 75074
1 e 20.00 = 20.00 ASSUM NAME

D11436