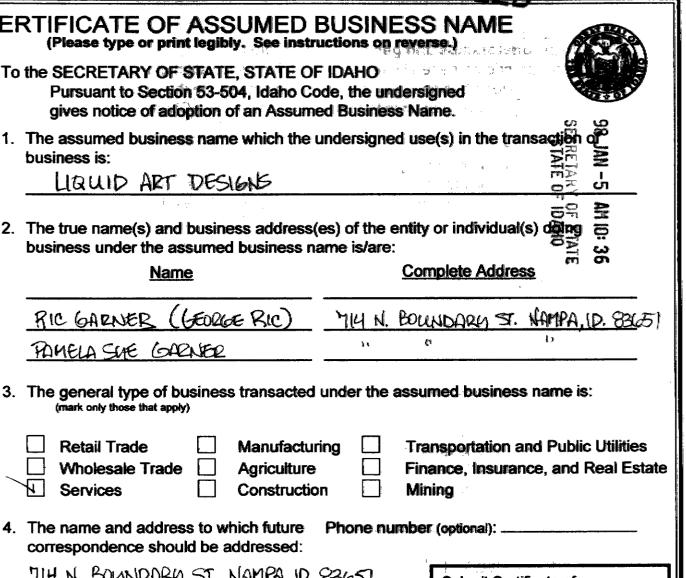
## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.



| The true name(e) and business address(es) | of the entity or individual(e)    | 59         |    |  |
|---|-----------------------------------|------------|----|--|
| LIQUID AKI DESIGNS                        |                                   | 92         | ப் |  |
| Linux And Track                           | No.                               |            | 1  |  |
| business is:                              |                                   | <b>S</b> F |    |  |
| b   | usiness is:<br>LIQUID ART DESIGNS |            |    | and the state of t |

business under the assumed business name is/are: Complete Address Name

|    | The state of the s |   |  |  |  |
|----|--|---|--|--|--|
|    | RIC GARNER (GEORGE RIC)  | 714 N. BOUNDARY ST. NAMPA, ID. 8365   |  |  |  |
|    | FAMELA SUE GARNER  | 34 64 13  |  |  |  |
| 3. | The general type of business transacted (mark only those that apply)   | e general type of business transacted under the assumed business name is:<br>(mark only those that apply) |  |  |  |
|    |  |   |  |  |  |

Manufacturing Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining

4. The name and address to which future Phone number (optional): \_ correspondence should be addressed: 714 N. BOUNDORY ST. NAMPA, ID. 83657 Submit Certificate of

Nampa ID 83651

Assumed Business Name and \$20.00 fee to:

5. Name and address for this acknowledgment CODY 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

IDANO SECRETARY OF STATE

01/05/1998 09:00 CX: 1142 CT: 92847 BH: 69781

1 0 20.00 = 20.00 ASSUM WAME

Signature: Mage 9 Printed Name: Ric Capacity: OWNER (see instruction # 8 on back of form)

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