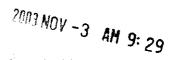


CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.



STATE OF IDAHO

The assumed business name which the under business is:		
2. The true name(s) and business address(es) of business under the assumed business name: Name Mary Longley P	• • • • • • • • • • • • • • • • • • • •	0
3. The general type of business transacted under Retail Trade Transportation ar Wholesale Trade Construction	er the assumed business name is: and Public Utilities	
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
4. The name and address to which future correspondence should be addressed: European Skincare of Sun Po Box 2223 Ketchum, ID 83340	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 (# other than # 4 above).	Phone number (optional): 208/726-5942	
	Secretary of State use only	
Signature:	IDAHO SECRETARY OF STATE 11/03/2003 05:00 CK: 1996 CT: 158010 BH: 709657 1 0 25.00 = 25.00 ASSUM NAME # 2	