



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.

2004 JAN 22 AM 8:42
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Half-Pint Productions

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

Name	Complete Address
Lucinda Heiken	24 E. 2nd St. Dietrich Idaho 83324
Donald Heiken	24 E. 2nd St. Dietrich Idaho 83324

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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
208 334-2301

4. The name and address to which future correspondence should be addressed:

Lucinda Heiken Half- Pint productions
24 E. 2nd St. Dietrich Idaho 83324

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):
1-208 544-2444

Secretary of State use only

D72349

Signature: Lucinda L. Heiken
(signature required)

Printed Name: Lucinda L. Heiken

Capacity/Title: Owner-Operator
(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
01/22/2004 05:00
CK: 1444 CT: 158810 BH: 722963
1 @ 25.00 = 25.00 ASSUM NAME # 2