

CERTIFICATE OF ASSUMED BUSINESS NAME

ELED/EFFECTIVE

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

2007 MAR 19 PM 3: 36

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:	
2. The true name(s) and <u>business</u> address(es) of the enbusiness under the assumed business name: Name CRASH ENTERTAIN MENT (LC 200/ W 18484	Complete Address
3. The general type of business transacted under the and Retail Trade	
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208 377-3503
	Secretary of State use only
signature: John Ronchoff'	IDAHO SECRETARY OF STATE

g. vcorp vorm: Revis

Capacity/Title: Owning Member

(see instruction # 5 on back of form)

CK: CASH CT: 158572 BH: 453166 1 @ 20.00 = 20.00 ASSUM NAME # 3 D 53065