

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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Please type or print legibly. NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: asting Impressions Photography 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 Jokeen Brinkman Almon 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Name and \$20.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson Impressions **Basement West** PO Box 83720 Boise ID 83720-0080 208 334-2301 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than # 4 above). Secretary of State use only

Signature: Drinkman

Printed Name: DReen Brinkman

Capacity: Owner Operator

(see instruction # 8 on back of form)

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IDAHU SECRETARY OF STATE 12/1/2002 05:200 CK: 1886 CT: 158810 BH: 651748 1 9 20.88 = 20.00 ASSUM NAME # ;

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