

CERTIFICATE OF ASSUMED BUSINESS NAME

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.

97 JUN 12 AM 9:13
SECRETARY OF STATE
STATE OF IDAHO

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

OneMaster IMAGE STUDIO
one word

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

Name	Address
<u>STEVEN A. SCROGGINS</u>	<u>1620 SPRINGA, POST FALLS, ID</u>
	<u>83854</u>

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

6, 7, 9
See categories on the reverse

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

OneMaster Image Studio
1620 SPRINGA, Post Falls, ID. 83854

Signed Steven A. Scroggin

By _____

Capacity President

Submit Certificate of Assumed
Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 06/12/1997
0900 101468 2
CK #: 1401 CUST# 82805
ASSUM NAME 1@ 20.00= 20.00

#: D 6398