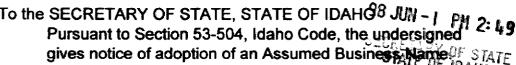
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)





To the SECRETARY OF STATE, STATE OF IDAHO JUN - PH 2: 49 Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Hame OF STATE 1. The assumed business name which the undersigned use(s) in the transaction of business is:	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
<u>Name</u>	Complete Address
Jenkins Taxidermy (L. Scot Jenkin)	724 Mark Avenue
	Idaho Falls, ID 83401-3154
3. The general type of business transacted under the assumed business name is:	
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining	
4. The name and address to which future Phone number (optional): correspondence should be addressed:	
High Country Art 724 Markes Avenue	Submit Certificate of Assumed Business Name and \$20.00 feeto:
 Tdaho Falls, ID 83401-3154 5. Name and address for this acknowledgm copy is (if other than # 4 above): 	Secretary of State 700 West Jefferson nent Basement West PO Box 83720 Boise ID 83720-0080
	208 334-2301 Secretary of State use only
	TRAIN CEPOETADY OF STATE
gnature: 2. Heat feelen	8 96/01/1998 09:00 CX: 137 CT: 9949 N: 11562

Sid

Printed Name: L. Scot Jenkins

Capacity: Owner - Sole Proprietor

(see instruction # 8 on back of form)

D15451