TFICATE OF ASSUMED BUSINE (Please type or print legibly. See instructions on reverse) (Please type or print legibly. See instructions on reverse) (Please type or print legibly. See instructions on reverse) (Please type or print legibly. See instructions on reverse) (Please type or print legibly. See instructions on reverse) (Please type or print legibly. See instructions on reverse) (Please type or print legibly. See instructions on reverse) (Please type or print legibly. See instructions on reverse) CERTIFICATE OF ASSUMED BUSINESSALA 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. Stand 1. The assumed business name which the undersigned use(s) in the transaction business is: HOLIDAY PAINTING 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address MIKE HOSEY 277 No4100 F RIGBY, ID. 83442 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Minina (208) Phone number (optional): 40 3 - 9273 4. The name and address to which future correspondence should be addressed: MIKE HOSEY Submit Certificate of Assumed Business 277 No 4100 E. Name and \$20.00 fee to: RIGBY ID. 83442 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only

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IDANO SECRETARY OF STATE

103/04/2003 05:00

CK: 865881318 CT: 158818 BH: 666281

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Signature: Muke Hosey

Printed Name: MIKE HOSEY

Capacity: OWNER

(see instruction # 8 on back of form)