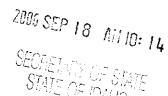


CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

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



TOTAL OCCUMENTATION OF TOTAL OCCUMENT	STATE OF IN STATE
The assumed business name which the undersigned use(s) in the transaction of business is:	
	Ballet and Theatrical Arts
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:	
Nikkii Dean Riley	Complete Address U45 S. Pendelhury In Blackfoot 10 83221
The general type of business transacted und	er the assumed business name is:
Retail Trade Transportation a Wholesale Trade Construction	and Public Utilities
Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West
1045 S. Pendelburyen Blackfort 10 P3221	PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmen copy is (if other than #4 above). 	Phone number (optional):
	Secretary of State use only
Signature: Make Construe required	IDAHO SECRETARY OF STATE 9/19/2006 95 # 90
Printed Name: NIKKII RILLY	Revised 04/2003
Capacity/Title: <u>Director</u>	IDANO SECRETARY OF STATE 99/19/2006 95:00
(see instruction # 8 on back of form)	CK: 849 CT: 204595 BH: 975864

1 0 25.00 = 25.00 ASSUM NAME # 2