CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)  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.			
1. The assumed business name which the undersigned use(s) in the transaction of business is:  Northwest Visual Designs			
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  Complete Address  P.O. Box 265  Meridian, 1D			
3. The general type (mark only those the	of business transacted ur		med business name is:
Retail Trade			
P.O. Ba		24.6	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and addres	Meridian, 10 83660 0265  Name and address for this acknowledgment copy is (if other than #4 above):		Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		<b>g</b>	Recretary of State use only IDANO SECRETARY OF STATE
ignature: Fackler		1	03/30/1998 09:00 CK: CRSH CT: %591 M: %634
Printed Name: J.S. Fackler			1 9 20.00 = 20.00 ASSUM NAME
Capacity: Own			D 1351/5
(see instruction # 8 on back of form)			

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