FILED EFFECTIVE

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 SECRETARY OF STATE gives notice of adoption of an Assumed Business Name. STATE OF IDAHO	
1. The assumed business name which the undersigned use(s) in the transaction of business is: Artistic Impressions	
 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
Charles & Luckie	203 mendowhrute Dr Nampu ID 83686
3. The general type of business transacted under the assumed business name is:	
Retail Trade	
4. The name and address to which future F carrespondence should be addressed:	Phone number (optional): 208-467-9328
Wanga . 2. 53666	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. 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
	Secretary of State use only
Signature: Cubic	Ravision 1798
Printed Name: (B) Dekie.	IDAHO SECRETARY OF STATE 11/10/2004 05:00
Capacity:	11/16/2004 05:00 CK: CASH CT: 158010 DH: 775950 1 0 25.00 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	D81797