

CERTIFICATE OF ASSUMED BUSINESS NAME

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:

ARTIFACTS

2. 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>	<u>Address</u>
<u>MICHAEL A. Jobes</u>	<u>4338 CHINDEN BLVD. BOISE, ID 83714</u>
<u>GAIL Jobes</u>	<u>4338 CHINDEN BLVD. BOISE, ID 83714</u>

3. The general type of business transacted under the assumed business name is:

Wholesale Trade

See categories on the reverse

4. The name and address to which correspondence should be addressed:

ARTIFACTS

4338 CHINDEN BLVD. BOISE, ID 83714

Signed

[Signature]

By

Michael A. Jobes

Capacity

owner

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
PO Box 83720
Boise ID 83720-0080

Customer #

Secretary of State use only

IDAHO SECRETARY OF STATE

05/20/1998 09:00
CK: CASH CT: 98974 BH: 112247

1 @ 20.00 = 20.00 ASSUM NAME

015130

Revision 10/96

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