Printed Name: EDWARD

(see instruction # 8 on back of form)

Capacity: 50

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse FECTIVE)

To the SECRETARY OF STATE, STATE OF IDAH 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 under-	signed use(s) in the transaction of
business is: Studio Laba	
2. The true name(s) and business address(es) of business under the assumed business name is  Name  Labadic	state.
The general type of business transacted unde (mark only those that apply)	
Retail Trade	<ul><li>Transportation and Public Utilities</li><li>Finance, Insurance, and Real Estate</li><li>Mining</li></ul>
<ol> <li>The name and address to which future Pho correspondence should be addressed:</li> </ol>	ne number (optional):
3720 Stone Creek Way Boise, 10 83703	Submit Certificate of Assumed Business Name and \$20.00 fee to:
	Secretary of State
5. Name and address for this acknowledgment copy is (if other than # 4 above):	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301