State of Idaho

Office of the Secretary of State

CERTIFICATE OF AUTHORITY

OF

ABSOLUTE FINISH, INC.

File Number C 159810

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: 4 April 2005



Ben yeura

SECRETARY OF STATE

By S. Ellason



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

undersigned Corporation applies	Gera Carlifonta of Authority	and states as follows:		
	I DLS CELUICATE DI WATHOUTY	are sizies as some me.		
The name of the corporation is:				
ABSOLUTE FINISH, IN	C.			
The name which it shall use in to				
It is incorporated under the laws	of WASHINGTON			
Its date of incorporation is	5/17/2004			
The address of its principal office			- 2	2005 A PR
	LEWISTON, ID 83501		Z S 7 6	
The address to which correspor	ndence should be addressed	, if different from item 5, is:	TE Of 1	1
			,	00601
	est affice in Idaho is: 1706	S OTH AVE NORTH, LEWIS	TON, LD	879 n r
The street address or its register	BO OHIOSH 138/10/10/1	···	* **	en. L
The street address of its register and its registered agent in Idaho The names and respective busin	ess addresses of its director	RT MCGINITY		24
and its registered agent in Idaho The names and respective busin	at that address atROBES	es and officers are:		24
and its registered agent in Idaho The names and respective busin	est that address is: ROBEI ness addresses of its director Office	es and officers are: Address		24
and its registered agent in Idaho The names and respective busin	est that address is: ROBEI ness addresses of its director Office	es and officers are: Address		24
and its registered agent in Idaho The names and respective busin	est that address is: ROBEI ness addresses of its director Office	es and officers are: Address		24
and its registered agent in Idaho The names and respective busin	est that address is: ROBEI ness addresses of its director Office	es and officers are: Address		24
and its registered agent in Idaho The names and respective busin Name ROBERT MOGINITY	est that address is:ROBES ness addresses of its director OfficePRESIDENT	Customer Acct #	FAX, WA	24
and its registered agent in Idaho The names and respective busin Name ROBERT MOGINITY Med: X 1 7 MAr 200 gnature: X Robert M	o at that address is: ROBER ness addresses of its director Office PRESIDENT	Customer Acct # (if using present acctum) g Secretary of S	FAX, WA	24
and its registered agent in Idaho The names and respective busin	o at that address is: ROBER ness addresses of its director Office PRESIDENT	Customer Acct #	FAX, WA	24

CK: 1865 CT: 187500 BH: 802459 1 8 100.00 = 100.00 AUTH PRO # 2



Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF ABSOLUTE FINISH, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 5/17/2004.

I FURTHER CERTIFY that as of the date of this certificate, ABSOLUTE FINISH, INC. remains active and has complied with the filing requirements of this office.

Date: March 30, 2005

UBI: 602-395-938

STATE OF WASHINGTON 1889 NOW 1889

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State