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 und business is:	dersigned use(s) in the transaction of
	Shelby lee L	uison
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Camil le Wilson &	100 w Jour St Brise Jd.
		837(la
3.	The general type of business transacted un	der the assumed business name is:
	Services (Modeling	
	See categories on the reverse	**************************************
	Gee categories on the reverse	
4.	The name and address to which correspond	dence should be addressed: Low Towa St Sl Icl 83706
4.	The name and address to which correspond	
4 .	The name and address to which correspond Same as above (40) Bold Signed	
4.	The name and address to which correspond Sawa as above (40) Boy Signed By	
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