CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reversit ED To the SECRETARY OF STATE, STATE OF IDAHO

(see instruction # 8 on back of form)

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name of the STATE

1. The assumed business name which the undersigned use(s) in the transaction of business is: Shadow West / Uni-Photo	
 The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: 	
John M. Rogers 10440	Excalibur - Boise, ID 83704
3. The general type of business transacted under the	assumed business name is:
(mark only those that apply) Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
	umber (optional)(308)375-44/4
10440 Excalibur	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
Man WRan 1988	Secretary of State use only IDANO SECRETARY OF STATE 62/19/1998 09:08 CK: CASH CT: 94584 BH: 83532
Signature:	1 8 20.00 = 20.08 ASSUM NAME
Printed Name: <u>JUM M.O. Rogers</u>	D 129 12