



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Secretary of State
Business Entities
www.idsos.com

FILED EFFECTIVE

2007 FEB -8 AM 9:09

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Local Color Studio

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Complete Address

Marlene M. Craig
Charles R. Craig

2174 E. Mountain Vista Dr
Coeur d'Alene, Id 83815

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Marlene Craig
2174 E. Mountain Vista Dr.
Coeur d'Alene, Id 83815

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

208-667-8283

Secretary of State use only

Signature:

Marlene Craig
(signature required)

Printed Name:

Marlene Craig

Capacity/Title:

Owner / Artist

(see instruction # 8 on back of form)

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Revised 04/2003

IDAHO SECRETARY OF STATE
02/08/2007 05:00
CK: 1097 CT: 158010 BH: 1031644
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 107990