CERTIFICATE OF ASSUMED BUSINESS NAME, (Please type or print legibly. See instructions on reverse.) 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 undersigned use(s) in the transaction of business is: Dream Pool Productions 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name OIY COLT A723 Kathryn ST. Boise Td. 83705 Ily Perry 1258 E. Cougar Creek 3. The general type of business transacted under the assumed business name is: (mark only those that apply) Retail Trade Manufacturing Transportation and Public Utilities *W*holesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future Phone number (optional): _____ correspondence should be addressed: 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

Secretary of State use only IDAMU SECRETARY OF STATE

08/03/1999 09:00 CX: 2637 CT: 182577 BH: 239161

1 @ 28.88 = 28.88 ASSUM NAME # 2

Printed Name: Cory ColT

Capacity: O-Owner

(see instruction # 8 on back of form)

D28114