CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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: PainT N Palette 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 EVIVAC B. Carter 305 Center MYCammoNIU83350 3. The general type of business transacted under the assumed business name is: (mark only those that apply) X Retail Trade Transportation and Public Utilities Manufacturing Finance, Insurance, and Real Estate Wholesale Trade **Agriculture** Minina X Services Construction 4. The name and address to which future correspondence should be addressed: Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State MXAMMONID. 83250 700 West Jefferson **Basement West** 5. Name and address for this acknowledgment PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301

Secretary of State use only

Signature: 6 Printed Name: Evigne

Capacity: Owner - MANAGET

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

62/18/1999 69:20 CK: 7182 CT: 98638 BH: 189834

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