Capacity: President

(see instruction # 8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Russuant to Section 53-504, Idaho Code, the undersigned of 1/2 PM \*98

1. The assumed business name which the undersigned uses in the transaction of business is:	
Idaho Window Blind	ls
The true name(s) and business address(e business under the assumed business na <a href="Name"><u>Name</u></a> R.M. Dietz Co. Inc.	es) of the entity or individual(s) doing ame is/are: <u>Complete Address</u> 2130 Broadway, Boise, ID 83706
3. The general type of business transacted to (mark only those that apply)  Retail Trade	ing  Transportation and Public Utilities Finance, Insurance, and Real Estate  Mining
correspondence should be addressed:  Mike Dietz	Submit Certificate of
	Assumed Business
2130 Broadway	Name and \$20.00 fee to:
Boise, ID 83706  5. Name and address for this acknowledgm copy is (if other than #4 above):  Mike Dietz	Name and \$20.00 fee to:  Secretary of State 700 West Jefferson
Boise, ID 83706  5. Name and address for this acknowledgm copy is (if other than #4 above).	Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080

D11310

Capacity:

President

(see instruction # 8 on back of form)

## 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 undersign

