Capacity/Title:\_MS-

(see instruction #8 on back of form)

## FILED EFFECTIVE **CERTIFICATE OF** ASSUMED BUSINESS NAME 035 JAM 20 Mil 9: 14

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

NOTE: See instructions on reverse before filing.

| The assumed business name which the undersign business is:  Artistic Fint  | gned use(s) in the transaction of   |
|--|---|
| 2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Sutame Louise Gardner   | Complete Address  6045, Fisher  Blackfoot, ID  83221  |
| 3. The general type of business transacted under t  Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining                 |   |
| Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Surance Lause Gardner  604 S. Fisher  Blackfoot, ID 8524 | Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgment copy is (if other than # 4 above):   | Phone number (optional):  208-785-3207- 208-478-4229-hm   |
| Signature Sullaure Gardner   | Secretary of State use only   |
| Printed Name: SUZUUNE GARANCH 1  | TRAUN GEORETARY ME CTATE  |

IDAHO SECRETARY OF STATE
01/20/2005 05:00
CX: 2163 CT: 158810 BH: 788299
8 25.80 = 25.80 ASSUM MANE # 2

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