

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

08 NOV 10 AM 9: 01

Please type or print legibly. NOTE: See instructions on reverse before filing.

SECRETARY OF STATE

The Art of Touch	
The true name(s) and business address(es business under the assumed business name Name Sandra L. McLean	s) of the entity or individual(s) doing ne: Complete Address 102 Emerald Dr, Kellogg, ID 83837
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction We Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Sandra L. McLean 102 Emerald Dr Kellogg, ID 83837	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above).	Secretary of State use only
ignature: Sandra L. McLean (signature required) Finited Name: Sandra L. McLean Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 11/10/2008 05

CK: 1794 CT: 85139 BH: 1143668 1 0 25.00 = 25.00 ASSUM MAME # 2

