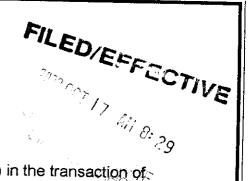


CERTIFICATE OF ASSUMED BUSINESS NAME

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

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



1.	The assumed business name which the undersigned use(s) in the transaction of business is:			
	WILD WACKY WOMEN	WILD WACKY WOMEN		
2.	The true name(s) and business address(es) business under the assumed business name Name Nonthern Antists Broup, Inc.	ie: <i>92</i> 7_	Complete Address	
	C145701		- FALL), W 030)4	
3.	. The general type of business transacted under the assumed business name is:			
	Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	and Pul	blic Utilities	
			Submit Certificate of Assumed Business Name and \$20.00 fee to:	
4.	The name and address to which future correspondence should be addressed:		Secretary of State 700 West Jefferson Basement West	
	W.D. BERT NEWMAN - C/O NORTHERN ARTISTS BROUP, INC. 927 E. POLSTON #305 POST FALLS, ID 8	3903-11	PO Box 83720 Boise ID 83720-0080 208 334-2301	
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):		Phone number (optional):	
	571Mc		(208)664-8318	
	Jenne		Secretary of State use only	
•	Signature: Sylone (signature required)		D59168	
	Name: W. D. BEET NEWMAN	g Noorpformstabn formstabn p65 Revised 09/2002		
Capaci	Capacity/Title: <u>Prespert</u> (see instruction # 8 on back of form)		IDAHO SECRETARY OF STATE 10/17/2002 05:00 CK: NO CK # CT: 164271 BH: 576544 1 0 20.00 = 20.00 ASSUM NAME # 2	