## 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 ur		
	business is:  Oak Street Sa		
2.	The true name(s) and business address(es business under the assumed business nar	. <i>()</i> s) of the	entity or individual(s) deling : දා
(	Sandra Schow		Complete Address S
	Oak Street Gallery	40	21 E. Oak Pocatello Idak
		<del></del>	83201
3.	The general type of business transacted up (mark only those that apply)	nder the	assumed business name is:
	Retail Trade	g 🗌	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
4.	The name and address to which future correspondence should be addressed:		Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	nt	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
			Secretary of State use only
gnatu inted	Name: SANDRA SCHOW	m6 Ravision 2/97	IDAHO SECRETARY OF STATE  08/13/1999 09:00  CK: 331 CT: 119225 BH: 241833
pacit		pVormstabn.pm6	1 8 20.00 = 20.00 ASSUM NAME # 2
	(see instruction # 8 on back of form)	corption	1) 28,795