

Signature: Matter Signatured

Printed Name: NATHAN LEGG

(see instruction #8 on back of form)

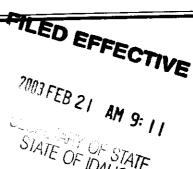
Capacity/Title: OWNER

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: LEGG FURNITURE (custom handmade lodge pale furniture) 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name NATHAN LEGG 2124 Happy Valley Rd.

LEGG FURNITURE Nampa, ld 83686 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of **Assumed Business** ✓ Manufacturing ___ Mining Name and \$20.00 fee to: Finance, Insurance, and Real Estate Secretary of State 4. The name and address to which future 700 West Jefferson correspondence should be addressed: **Basement West** PO Box 83720 NATHAN LEGG Boise ID 83720-0080 2124 Happy Valley Rd. Nampa, ld 83686 208 334-2301 Phone number (optional): 5. Name and address for this acknowledgment (208) 466 - 2147 cell: (208) 602-1845 CODV is (if other than # 4 above): Secretary of State use only

> corptionmstabn formstabn. Revised 09/2002

IDAHO SECRETARY OF STATE
02/21/2003 05=00
CK: 1339 CT: 158010 BH: 664359
1 0 20.00 = 20.00 ASSUM NAME # 2

D 62709