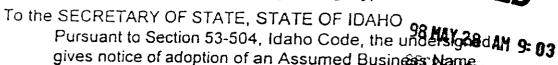
CERTIFICATE OF ASSUMED BUSINES

(Please type or print legibly)





2. The true name(s) and business address(es) of business under the assumed business name Name Studios	is/are: <u>Complete Address</u>
JAN LEEN	TWIN FAILS ID 833
Retail, Trade Manufacturing Wholesale Trade Agriculture Services Construction 4. The name and address to which future	☐ Transportation and Public Utiliti☐ Finance, Insurance, and Real E☐ Mining
correspondence should be addressed: \[\frac{\frac{1AN}{AN}}{\frac{1EEN}{ANE.E.}} \] \[\frac{100}{\frac{1NN}{ANE.E.}} \] \[\frac{1}{\frac{1NN}{ANE.E.}} \] 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West 5 PO Box 83720

Capacity: President - Owner

(see instruction # 8 on back of form)