CERTIFICATE OF ASSUMED BUSINESS NAME

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 undersigned use(s) in the transaction of business is:

Quality One Photo

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

	business ander the assumed business name	15/410.
	<u>Name</u>	Complete Address
		CONCORDIA CIT TWINFULLS IN SIGN
	Geana Davis 617 Con	coudin CV Twinfalls Id 83301
	The general type of business transacted under the assumed business name is: (mark only those that apply)	
	 ☑ Retail Trade ☐ Wholesale Trade ☐ Services ☐ Manufacturing ☐ Agriculture ☐ Construction 	 □ Transportation and Public Utilities □ Finance, Insurance, Real Estate □ Mining
	The name and address to which future correspondence should be addressed: Alan D. Davis	Submit Certificate of Assumed Business Name and \$20:00 fee to:
	617 Concordia Circle	reame and \$20.00 fee to.
	Twin Falls, Idaho 83301	Secretary of State
	Name and address for this acknowledgement copy is (if other than 4 above):	700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
		Secretary of State use only
_	nature: ALAN D. Davis	IDAHO SECRETARY OF STATE
Signature: Sole Proprietor Printed Name: GENNA M. DAVIS Capacity: Sole Proprietor		01/05/2000 09:00 CK: 32239 CT: 1874 BH: 278899
		1 @ 20.00 = 20.00 ASSUM MANE # 2
		D \$100 B
		D 31843
	(see instruction 8 on back of form)	