CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.) Let δ / 17 PM \bullet	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned STATE CONTROL OF STATE CON	
1. The assumed business name which the und	ersigned use(s) in the transaction of
business is: (LP SLK C Studio	m c
Cheshka Studio	·>
The true name(s) and business address(es) business under the assumed business name	
Katie Michelle Garrett	Complete Address 1777 Gekeler lane
INTIC MICHELLE OWING	
	Boise, ID 83706
The general type of business transacted und (mark only those that apply)	der the assumed business name is:
 ☒ Retail Trade ☐ Wholesale Trade ☐ Agriculture ☒ Services ☐ Construction 	Finance, Insurance, and Real Estate Mining
correspondence should be addressed:	none number (optional): (208) 367-1714
Katre Garrett	Submit Certificate of
1777 Gekeler lane	Assumed Business Name and \$20.00 fee to:
Boise ID 83706	
	Secretary of State 700 West Jefferson
5. Name and address for this acknowledgmen	Basement West
COPY IS (if other than # 4 above):	PO Box 83720
	Boise ID 83720-0080 208 334-2301
	Secretary of State use only
	I -
Vateo land	IDANO SECRETARY OF STATE 89/07/2008 69:80
Signature: Katre Staveth	CK: 150 CT: 135652 BH: 346615
Printed Name: Katie Garrett	1 0 20.00 = 20.00 ASSUN NAME # 2
Capacity:	1 0 20.00 = 20.00 ASSUM NAME 11 2
(see instruction # 8 on back of form)	l e