CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

	(, , , , , , , , , , , , , , , , , , ,	37			LARGE OF MAL		
Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name Company of STATE OF IDAHO							
1.	The assumed business name which the undersigned use(s) in the transaction of business is: Style Fabrics International						
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:						
	Name	Name Con			nolete Address		
	Tamara M. Bos	10600 N. Three Forks Rd.					
		Post Fa					
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)						
	Retail Trade Manufacturin Wholesale Trade Agriculture Services Construction	Fi			n and Public Utilities rance, and Real Estate		
4.	The name and address to which future						
	Style Fabrics, International attn: Tamara Bos	P	Ass	umed	ertificate of Business d \$20.00 fee to:		
	620 N. Spokane St. Post Falls, 10 83854		B		of State Jefferson		
5.	Name and address for this acknowledgme	ent			t West		
٠.	CODY is (if other than # 4 above):	/···		Box 8			
	Same			se iD : 334-2	83720-0080 2301		
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16/08/1997 09:00 CX: 2249 CT: 86258 BH: 45188

1 9 20.00 = 20.00 ASSUM NAME

D 8701

Signature:_

Printed Name: TAMBRA BOS Capacity: owner

(see instruction # 8 on back of form)