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CERTIFICATE OF ASSUMED BUSINES Pursuant to Section 53-504, Idaho Code, submits for filing a certificate of Assumed <u>Please type or print legibly.</u> NOTE: See Instructions on reverse befor	F Secretary of State S NAME the undersigned Business Name. STATE OF IDARO
 The assumed business name which the unbusiness is: <u>All iN 1 Advertisin</u> The true name(s) and <u>business</u> address(enbusiness under the assumed business name <u>Name</u> <u>VEREMY N CIARK</u> <u>Thad Bolek</u> <u>CIADI CIAPK</u> 3. The general type of business transacted under the second second	S) of the entity or individual(s) doing me: <u>Complete Address</u> <u>2540 Titletst Post Falls ID 83854</u> <u>2547 14 Place CDA ID 83854</u> <u>2540 Titletst Post Falls ID 83854</u>
	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: <u>2540</u> THEISH <u>Post Falls</u> ID \$3854	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmer COPY is (if other then # 4 above). 	nt ' Phone numbor (optional): 208-818-7.675
Signature: Frinted Name: JERCMY CLARK Capacity/Title: OWNER (see instruction # 8 on back of form)	Image: Substance of State Use only IDAHO SECRETARY OF STATE IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII