CERTIFICATE O	F
ASSUMED BUSINES	S NIANAT
	the undersigned 2007 JUL 27 PM 1=54
a continuate of Assumed	Business Name.
Please type or print legibly. NOTE: See instructions on reverse bef	SECRETARY OF STATE STATE OF IDAHO
 The assumed business name which the ur business is: 	ndersigned use(s) in the transaction of
	emporary Tattoos
 The true name(s) and business address(explicitly business under the assumed business nar Name 	
Castle Investments LLC	Complete Address
613660	6110 Castle Drive Boise, ID 83703
 Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed: <u>Castle Investments LLC</u> 6110 Castle Drive Boise, Idaho 83703 	n and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Bolse ID 83720-0080 208 334-2301
5. Name and address for this acknowledges	
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	nt Phone number (optional):
ature: <u>Ilinginia R Hemley</u>	
ature: <u>Ilinginia R. Hensley</u>	