CERTIFICATE OF ASSUMED BUSINESSMAME (Please type or print legibly. See instructions on reverse.)

	•	J .		•		01.	
To the	SECRET	ARY O	F STATE	E, STAT	E OF IDAHO	111 APR -4	ÁM a
	Pursuani	เบ วะต	เดน ออ-อเ	04, Iuari	o code, the t	andersigned	
	gives noti	ice of a	doption o	of an Ass	sumed Busine	ess Name	10.9 1AL

	gives notice of adoption of an	Assumed	Busin	less wante or mariale					
1.	The assumed business name which the undersigned use(s) in the transaction of business is:								
	Michael Lewis Photography								
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:								
	<u>Name</u>	Complete Address							
	LAMCO, L.L.C.	105 South Maple Ave., Sugar City, ID 83448							
	<u> </u>								
	,								
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)								
	Retail Trade Manufactur Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate							
	The name and address to which future Phone number (optional): correspondence should be addressed:								
	LAMCO, L.L.C.		Submit Certificate of						
	DOD 355			Assumed Business					
	POB 355		Name and \$20.00 fee						
	Sugar City, ID 83448			Secretary of State					
	Name and address for this asknowledge	oont		700 West Jefferson					
	Name and address for this acknowledgm copy is (if other than # 4 above):	ient		Basement West PO Box 83720					
	Allied Financial Services			Boise ID 83720-0080 208 334-2301					
	POB 674			Secretary of State use only					
	Rexburg, ID 83440	ion 12/99		IDAHO SECRETARY OF STATE					

CK: 2343 CT: 87111 BH: 388998

1 2 28.60 = 20.00 ASSUM NAME # 2

044240

Signature: Muty / hum Printed Name: Michael J. Lewis

Capacity: Manber

(see instruction # 8 on back of form)