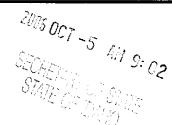


CERTIFICATE OF



| ASSUMED BUSINESS NA Pursuant to Section 53-504, Idaho Code, the under submits for filing a certificate of Assumed Business Please type or print legibly. NOTE: See instructions on reverse before filing | rsigned SCA STATE |
|---|---|
| 1. The assumed business name which the undersigned use(s) in the transaction of business is: A Grand Wedding an Event Planner | |
| 2. The true name(s) and business address(es) of the business under the assumed business name: Name Powder Mountain Press, LC P.O. (W45852) | Complete Address |
| 3. The general type of business transacted under the Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate | İ |
| 4. The name and address to which future correspondence should be addressed: Powder Mountain Press, UC PO. Box 1167 Driggs 10 83422 | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| Name and address for this acknowledgment copy is (if other than # 4 above). | Phone number (optional): 208 - 354 - 3466 |
| | Secretary of State use only |
| Signature: Multiple Cay Printed Name: Nancy McCullargh McCay Capacity/Title: resident. / Tublisher | IDAHO SECRETARY OF STATE 10/05/2006 05:00 CK: 2354 CT: 86778 BH: 978824 1 25.00 = 25.00 ASSUM NAME # 2 |