

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing. FILED EFFECT!

06 MAY 12 PM 2:17

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which it	DAHO .
 The assumed business name which the undersi business is: 	igned use(s) in the transaction of
Great Wooden Re	plicas
 The true name(s) and <u>business</u> address(es) of t business under the assumed business name: 	
Name ()	Complete Address
	134 W State St, Ste 183, 13x ID 83714
The general type of business transacted under the second control of the second cont	
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture	
☐ Manufacturing☐ Mining☐ Finance, Insurance, and Real Estate	Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Cames Falcable Cable Cable	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-409-9354
	Secretary of State use only
Signature: Ame To da la la la granda	V1899 a
Printed Name: (signature required)	IDAHO SECRETARY OF STATE 05/12/2006 05:00
Signature: (signature required) Printed Name: (signature required) Capacity/Title: (see instruction # 8 on book of 6 mm)	CK: 7517 CT: 158010 BH: 954536 1 8 25.00 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	