



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

2007 MAR -6 AM 8: 24

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Three Forks Gallery

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Complete Address
Youde - Three Forks Gallery LLC	1210 S Samson Trail
W 160029	PO Box 1637
	McCall, ID 83638

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

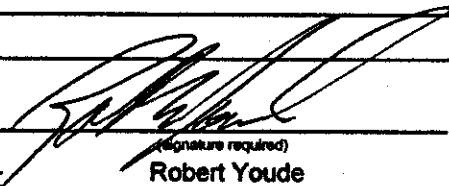
Youde - Three Forks Gallery LLC
PO Box 1637
McCall, ID 83638

Phone number (optional):

208-634-1707

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Signature:



Printed Name:

Robert Youde

Capacity/Title:

Manager/Partner

(see instruction # 8 on back of form)

Secretary of State use only

D 108912

IDAHO SECRETARY OF STATE
03/06/2007 05:00
CK: 1988 CT: 194284 BH: 1037470
1 @ 25.00 = 25.00 ASSUM NAME # 3

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Revised 04/2003