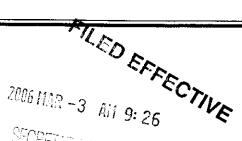


(see instruction #8 on back of form)

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.





 The assumed business name which the un- business is: 	dersigned use(s) in the transaction of
OLD PARLOR STAINED	GLASS COMPANY
2. The true name(s) and business address(es business under the assumed business name Name DAVE MOON LYNDA MOON	
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction	nder the assumed business name is: and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: DANE MOON 3955 GREGG CIRCLE POCATELLO, IDAHO 8320	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):	nt Phone number (optional): 208-237-2019
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 23/03/2006 45:00 CK: 8671 CT: 158010 BH: 940837 1 2 25.00 = 25.00 ASSUM NAME # 2

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