



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2005 AUG 26 AM 8:52

FILED EFFECTIVE

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:

H1 EDITING

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

JULIE KAY HUTCHCROFT 126 11th STREET
IDAHO FALLS, ID
83404

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

<input type="checkbox"/>	Retail Trade	<input type="checkbox"/>	Transportation and Public Utilities
<input type="checkbox"/>	Wholesale Trade	<input type="checkbox"/>	Construction
<input checked="" type="checkbox"/>	Services	<input type="checkbox"/>	Agriculture
<input type="checkbox"/>	Manufacturing	<input type="checkbox"/>	Mining
<input type="checkbox"/>	Finance, Insurance, and Real Estate		

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

H1 EDITING
126 11th ST.
IDAHO FALLS, ID 83404

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

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

Phone number (optional):

Signature: Julie Hutchcroft
(signature required)
 Printed Name: JULIE HUTCHCROFT
 Capacity/Title: SOLE PROPRIETOR

(see instruction # 8 on back of form)

g100pmtmstate formmbrn.p65
 Revised 04/2003

Secretary of State use only

IDAMO SECRETARY OF STATE
 08/26/2005 05:00
 CK: 5765 CT: 158810 BH: 988365
 1 # 25.00 = 25.00 ASSUM NAME # 2

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