



CERTIFICATE OF ASSUMED BUSINESS NAME

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

2007 JAN 31 AM 9:09

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:

The Natural Finish

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

Name
Restorations, Inc.

(C146345)

Complete Address
PO Box 4483, Ketchum, ID 83340

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

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

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

Tom Liston

Restorations, Inc.

PO Box 4483, Ketchum, ID 83340

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):

208-578-7963

Signature: Tom Liston (signature required)

Printed Name: Thomas J Liston

Capacity/Title: President/Owner

(see instruction # 8 on back of form)

g:\kop\information\form\abn\p65
Revised 04/2003

IDAHO SECRETARY OF STATE
01/31/2007 05:00
CK: 3551 CT: 103422 BH: 1029945
1 @ 25.00 = 25.00 ASSUM NAME # 2

D107736