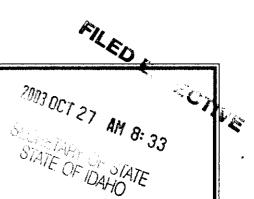


(see instruction # 8 on back of form)

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 undersignate business is: Haus Vom Brett Training	ed use(s) in the transaction of
2. The true name(s) and business address(es) of the business under the assumed business name: Name Cathy Tordan 90	Complete Address
3. The general type of business transacted under the assumed business name is:	
Retail Trade	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 Phone number (optional):
	0 4 504
Signature:	IDANO SECRETARY OF STATE 10/27/2003 05 = 06 CK: 11566 CT: 173894 BH: 788489 1 8 25.86 = 25.86 ASSUM NAME # 2

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