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.

(see instruction # 8 on back of form)

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SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filin	STATE OF IDAHO	- ; ; ;
The assumed business name which the undersign business is: Photography by	ned use(s) in the transaction of	FFECTIVE
2. The true name(s) and business address(es) of the business under the assumed business name: Name Amy L. Blake	e entity or individual(s) doing Complete Address 2051 W. Glade Cree Menidiah, 10 8364	k Dr
3. The general type of business transacted under the	e assumed business name is:	
Retail Trade Transportation and P Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Amy Blake 261 W. Gade Cr Drive Meridian, ID 83646 5. Name and address for this acknowledgment copy is (if other than #4 above): Same as advice.	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 Check # 120 enclose Phone number (optional):	
ignature full bake rinted Name: Amy L. Bake apacity/Title: Owner	Secretary of State use only	ne otate
rinted Name: Amy L. Bake Bapacity/Title: Owner	02/27/2009 CX: 1390 CT: 150010	OF STATE 05 = 000 BH: 115900: ASSUM NAME (