CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 08 APR 22 PN 4= 36 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 SNDRA STUDIOS 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name er unterpr **Complete Address** 5250 WEST CLIMPSU BUD 607 3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Idaho Secretary of State correspondence should be addressed: 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301 5. Name and address for this acknowledgment COPY is (if other than # 4 above): G.11. Secretary of State use only Signatur Printed Name: Capacity/Title: M IDAHO SECRETARY OF STATE 22/2008 05:00 (see instruction # 8 on back of form) CT: 172099 BH: 1111366 25.00 ASSUM NAME 121127