

CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 JAN 15 AM 8:15

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

| Picture This | ! Hardwood F | rames | |
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| The true name(s) and business address(s) business under the assumed business name Name Steven Paul Howard | ame: | entity or individual(s) doing Complete Address d Springs Drive Fish Haven Idaho 83 | 287 |
| 3. The general type of business transacted Retail Trade Transportati | | | |
| Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Steven Howard 469 Cold Springs Drive Fish Haven Idaho 83287 | n | Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301 | |
| 5. Name and address for this acknowledge copy is (if other than #4 above): | - ment | · | |
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