FILED EFFECTIVE



CERTIFICATE OF ASSUMED BUSINESS NAME

2006 MAY 17 AM 8: 14

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

SECRETARY OF TOAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned use(s) in the transaction of business is: Magic Barter		
The true name(s) and business address(es) of business under the assumed business name: Name Steven Seaman		tity or individual(s) doing Complete Address phomore Blvd Twin Falls, ID. 83301
3. The general type of business transacted under Retail Trade Transportation and 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 Seaman 486 sophomore Blvd. Twin Falls, id. 83301		
5. Name and address for this acknowledgmen copy is (if other than #4 above).	t	Phone number (optional): 208-404-9461
Signature: Steven Seaman Capacity/Title: Owner (see instruction # 6 on back of form)	gtacyloinelabh iornalabhp66 Reneedd4/2003	IDAHO SECRETARY OF STATE 05/17/2006 05:00 CK: 886674 CT: 172899 BH: 955893 1 9 25.88 = 25.88 ASSUM NAME # 2