CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)			
To the SECRETARY OF STATE, STATE OF IDAHO9 MAR 23 PM : 45  Pursuant to Section 53-504, Idaho Code, the undersigned of STATE gives notice of adoption of an Assumed Business Name   10 AHO			
1.	The assumed business name which the undersigned use(s) in the transaction of business is:		
	Idaho Monthly	y Enter	ztainment
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:		
	<u>Name</u>	Con	nplete Address
(	MAKINE GRAZIAN 4	1359 W	odleres ct. 3d. 83705
3.	The general type of business transacted under the assumed business name is:  (mark only those that apply)		
	Retail Trade		
4.	4. The name and address to which future Phone number (optional): <u>その )つんてん</u> ちつ correspondence should be addressed:		
CO:	MAKINE GRAZIAN		Submit Certificate of Assumed Business
	4359 Wood acreact		Name and \$20.00 fee to:
	Esise, Jd. 83705		Secretary of State 700 West Jefferson
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):	nt	Basement West PO Box 83720
	COPY 13 (II other trial # 4 above).		Boise ID 83720-0080 208 334-2301
	<u> </u>		Secretary of State use only
	<i>t</i> ,	Revision 2/97	IDAHO SECRETARY OF STATE  03/23/1999 89:00
Signatu	ire: Maxina Strazeau	<b>8</b> €	X: none CT: 112995 BH: 199798
Printed Name: MAXINE GRAZIAN		on.pm6	The state of the s
Capacity: Own (see instruction # 8 on back of form)		korpVormstæbn.pm6	D24319
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