

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.

FILED EFFECTIVE

2003 OCT 27 AM 8:57
SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

CORAL BAY PAINTING.

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name
Virgil Wellman
EVALINA Wellman

Complete Address
1294 New York St.
1294 New York St.
MIDDLETON, ID. 83644

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input checked="" type="checkbox"/> Construction |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

4. The name and address to which future correspondence should be addressed:

1294 New York St.
MIDDLETON

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Virgil Wellman
1294 New York St.
MIDDLETON, ID. 83644

Signature: [Signature]

(signature required)

Printed Name: Virgil Wellman

Capacity/Title: Sole Prop.

(see instruction # 8 on back of form)

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

Phone number (optional):

585-5977

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
10/27/2003 05:00
CK: NO CK # CT: 150010 BH: 700426
1 @ 25.00 = 25.00 ASSUM NAME # 2

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