Signature: 1/20

Printed Name:

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2007 MAR 26 AM 10: 18

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

1. The assumed business name which the undersigned use(s) in the transaction of business is: THE STUDIO 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address THOMAS PAUL BATEMAN 720 13TH AVE LEWISTON ID 83501 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Services Agriculture Submit Certificate of Manufacturing --Assumed Business Mining Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State 700 West Jefferson correspondence should be addressed: **Basement West** THOMAS PAUL BATEMAN PO Box 83720 Boise ID 83720-0080 720 13TH AVE 208 334-2301 **LEWISTON ID 83501** Phone number (optional): 5. Name and address for this acknowledgment CODY IS (if other than # 4 above): 208-746-9359 Secretary of State use only

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(signature required)
THOMAS PAUL BATEMAN

OWNER

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE

03/26/2007 05:00

CK: 185163385 CT: 158010 BH: 1042427
1 0 25.00 = 25.00 ASSUM NAME # 2

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