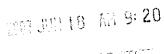


CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned



 The true name(s) and business address(es business under the assumed business nar 	s) of the entity or individual(s) doing me:
Name	Complete Address
Steve Walsh (Architect for Business. com)	P.O. Box 694 Athol, ID 83801
Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Steve Walsh	Submit Certificate of Assumed Business
Architect for Business P.O. Box 694 Athol, ID 83801	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above).	ent Phone number (optional):

(see instruction # 8 on back of form)