CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned file gives notice of adoption of an Assumed Business Name.	
The assumed business name which the undersigned use(s) in the transaction of business is:	
Flou Mark	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
Paul Janssen	Complete Address 202 1/2 Thula St.
Laurie Janssen 5	P.O. Box 136
	McCall, ID 83638
The general type of business transacted under the assumed business name is: (mark only those that apply)	
Retail Trade Manufacturion Wholesale Trade Agriculture Services Construction	Finance, Insurance, and Real Estate
4. The name and address to which future Phone number (optional): correspondence should be addressed:	
P.O. Box 136 McCall, ID 83638	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgme copy is (if other than #4 above):	Secretary of State 700 West Jefferson
	Secretary of State use only 130HO SECRETARY OF STATE
Signature: Paul Dans	03/38/1999 09:08 CK: 3929 CT: 113296 BH: 281974
Printed Name: Paul Janssen	1 0 20.00 = 20.00 ASSUM HANE # ?
Capacity: Owner	60c phomostabu. pgg
(see instruction # 8 on back of form)	g:\corpl