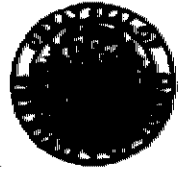


CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

Arrow L. Gallery

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

Name

Gary D. Likkel

Complete Address

221 East Main RT 2 Box 222

Grangeville, ID 83530

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|--|--|--|
| ☒ Retail Trade | ☐ Manufacturing | ☐ Transportation and Public Utilities |
| ☐ Wholesale Trade | ☐ Agriculture | ☐ Finance, Insurance, and Real Estate |
| ☐ Services | ☐ Construction | ☐ Mining |

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

Gary D. Likkel DBA Arrow L. Gallery

221 East Main Grangeville, Id 83530

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

FirstBank Northwest

920 Main Street

Lewiston, ID 83501

Signature: _____

Printed Name: Gary D. Likkel

Capacity: Owner

(see instruction # 8 on back of form)

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

IDAHO SECRETARY OF STATE Use only

05/22/1998 09:00
CK: 3642837 CT: 7001 BH: 113827

1 @ 20.00 = 20.00 ASSUM NAME

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