227 **ERTIFICATE 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 Duri 1. The assumed business name which the undersigned use(s) in the transaction of business is: SKYWALKER Studios 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name Meile 215 Locust St. MampA, IO 215 Laws ST. Namph ID, 8862 PPYS 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 Aariculture Finance, Insurance, and Real Estate Services Construction Mining 4. The name and address to which future correspondence should be addressed: Submit Certificate of 215 LOUKT ST. NamPA -FD 8308f Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West 5. Name and address for this acknowledgment PO Box 83720 CODY IS (if other than # 4 above). Boise ID 83720-0080 208 334-2301 Secretary of State use only IDANO SECRETARY OF STATE 06/26/1998 09:00 581 CT: 188735 NI: 123235 Signature: / 1 8 28.08 = 29.00 ASSUM NAME Printed Name: D16217 Capacity: (see instruction # 8 on back of form) * Please SEND US A Receipt.