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

gives notice of adoption of an A	ssumed Business Name.
 The assumed business name which the un business is: 	ndersigned use(s) in the transaction of
PETE HECHT PHO	TOGRAPHY
2. The true name(s) and business address(es business under the assumed business name Name PETER W. HECHT	s) of the entity or individual(s) doing ne is/are: Complete Address State State
3. The general type of business transacted un	2
☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	Transportation and Public Utilities Finance, Insurance, and Real Estate Mining
correspondence should be addressed:	hone number (optional): 386-9-38-7
SIB AMERICANA BLUD	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IDAHO SECRETARY OF STATE 01/10/2001 09:00 CK: 2169 CT: 148636 BH: 371961
Signature: Declar	
Printed Name: PETER HECHT	1 8 28.88 = 28.80 ASSUM NAME # 2
Capacity: Solf aures	D 41718

(see instruction # 8 on back of form)