

Capacity/Title:

Owner/Manager

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

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

submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2009 JAN 20 PM 12: 44

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

I ne Purs	se Princess
The true name(s) and business address(es) business under the assumed business nam Name	
Micah Bradshaw	1415 North 1060 East, Shelley, Idaho 83274
The general type of business transacted und Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301
i. Name and address for this acknowledgme copy is (if other than # 4 above):	ent .
	Secretary of State use only
	IDAMO SECRETARY OF STATE 01/20/2009 05 = 00 CK: 160 CT: 233207 BH: 1153007 THE 25.00 = 25.00 ASSUM MANE \$