



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**Please type or print legibly.**  
**NOTE: See instructions on reverse before filing.**

32 SEP 11 AM 9:27  
 STATE OF IDAHO  
 SECRETARY OF STATE

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

WING AND A PRAYER

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

Name

Complete Address

ROCK E. PHILLIPS

290 W 3rd S Box 608 GRACE, ID 83241

VICKI L. PHILLIPS

" " "

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

VICKI PHILLIPS

PO BOX 608

GRACE, ID 83241

Submit Certificate of  
Assumed Business  
Name and **\$25.00** fee to:

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

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

Phone number (optional):

VICKI L. PHILLIPS

Signature: Vicki Phillips  
(signature required)

Printed Name: Vicki Phillips

Capacity/Title: CUNPER

(see instruction # 8 on back of form)

Secretary of State use only

1068778