

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

## Please type or print legibly. Instructions are included on back of application.

CERTIFICATE OF  ASSUMED BUSINESS  Pursuant to Section 53-504, Idaho Code, the submits for filing a certificate of Assumed Expenses type or print legibly. Instructions are included on back of apprenticed in the control of the contro	S NAME ne undersigned Business Name.
The assumed business name which the unbusiness is:  EASY QUILTER  Output  EASY QUILTER	dersigned use(s) in the transaction of
The true name(s) and <u>business</u> address(es business under the assumed business nam <u>Name</u> MARY DANIELSON  LAWERENCE H DANIELSON	of the entity or individual(s) doing ne:  Complete Address  1720 FALCON CIRCLE S, POCATELLO, ID 83204  1720 FALCON CIRCLE S, POCATELLO, ID 83204
3. The general type of business transacted ur  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	nder the assumed business name is: and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  MARY DANIELSON / EASY QUILTER  1720 FALCON CIRCLE So.  POCATELLO, ID 83204-7413	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	ıt .
Signature:	Secretary of State use only
Printed Name: MARY DANIELSON	

IDAHO SECRETARY OF STATE
11/19/2012 05:00
CK; 2550 CT: 158010 BH: 1348031
1 0 25.00 = 25.00 ASSUM NAME # 2

Capacity/Title: CF/2

Printed Name: Lawrence H

Signature: \_

Capacity/Title: