

227



# 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.**

**FILED EFFECTIVE**

2005 SEP 16 PM 2:38

SECRETARY OF STATE  
STATE OF IDAHO

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

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
<u>Thomas Stokes</u>	<u>P.O. Box 727 Blackfoot Idaho 83221</u>
<u>Laurel Larsen-Stokes</u>	<u>Same as above</u>

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

Thomas Stokes  
P.O. Box 727  
Blackfoot, ID 83221

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

*Thomas Stokes*  
(signature required)

Printed Name: \_\_\_\_\_

Thomas Stokes

Capacity/Title: \_\_\_\_\_

OWNER

(see instruction # 8 on back of form)

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

Phone number (optional): \_\_\_\_\_

Secretary of State use only

ID 53-504-101 Form 1-2001 (Rev. 04/2005)

09/16/05

IDAHO SECRETARY OF STATE  
09/16/2005 05:00  
CK: 614691 CT: 172099 BN: 912134  
1 @ 25.00 = 25.00 ASSUM NAME # 2