## 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 Assumed Business Name.

1.	The assumed business name which the ubusiness is:	undersigned use(s) in the transaction of
	Simply Tole	
2.	The true name(s) and business address(e business under the assumed business na Name	
	Doris C Province	1120 Hickory
		Sandpoint, Idaho 83864
3.	The general type of business transacted (mark only those that apply)	d under the assumed business name is:
	Retail Trade	Finance, Insurance, and Real Esta
4.	The name and address to which future correspondence should be addressed:  Doris C Province	Phone number (optional):  Submit Certificate of
	1120 Hickory	Assumed Business Name and \$20.00 fee to:
	Sandpoint, Idaho 83864	Secretary of State
5.	Name and address for this acknowledgm copy is (if other than # 4 above):	700 West Jefferson
	· Same	Secretary of State use only
	ure: Manusce  Doris C Province	IDANO SECRETARY OF STATE  - G8/07/2002 05 # 06  CK: 1730 CT: 158816 BH: 4813  - 1 6 28.88 = 28.88 ASSUM NAME
pac	city: owner	1 8 28.80 = 28.80 ASSUM MANE  - 157/34
÷	(see instruction # 8 on back of form)	