



# 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**

DEC 31 AM 11:40

SECRETARY OF STATE  
STATE OF IDAHO

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

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

Squared Off

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

Rouchelle Abrahamson

Complete Address

1689 W. Shoreline Drive Apt 410  
Boise, Idaho 83702

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

Submit Certificate of Assumed Business Name and **\$20.00** fee to:

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

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

Rouchelle Abrahamson  
1689 W. Shoreline Drive Apt 410  
Boise, Idaho 83702

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

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

Phone number (optional):

371-7667

Secretary of State use only

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Signature: Rouchelle Abrahamson  
(signature required)

Printed Name: Rouchelle Abrahamson

Capacity/Title: President

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE  
**12/31/2002 05:00**  
CK: CASH CT: 150010 BH: 654033  
1 @ 20.00 = 20.00 ASSUM NAME # 2

*D61065*