

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

FILED SECTIVE

2006 JAN 17 AM 10: 05

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

The assumed business name which the undersigned business is:	E.
The Frame + GLA	35 3h0p
2. The true name(s) and business address(es) of the elements business under the assumed business name: Name The Frame & Glass Shop 37	entity or individual(s) doing Complete Address
3. The general type of business transacted under the	assumed business name is:
☐ Retail Trade ☐ Transportation and Pu☐ Wholesale Trade ☐ Construction	blic Utilities
Services	Submit Certificate of Assumed Business Name and \$25.00 fee to:
Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: 5 hirlene Stowers	Secretary of State 700 West Jefferson Basement West PO Box 83720
3720 E. 190 N Rigby, Dd. 83442	Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional):
	Secretary of State use only
Signature: Shirlene Stowers Printed Name: Shirlene Stowers Capacity/Title: Owner (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 01/17/2006 05:00 CK: NO CK# CT: 195947 BH: 932263 1 9 25.00 = 25.00 ASSUM NAME #

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