

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED EFFECTIVE

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

2006 MAY 12 AH 9: 13

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

SECRETARY OF OT.

Casual Livi	ing Furnishings
The true name(s) and business address(est business under the assumed business name     Name     Karen Farrar     Chad Farrar	
	nder the assumed business name is: n and Public Utilities
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Karen Farrar	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
5. Name and address for this acknowledgme copy is (if other than #4 above):	ent Phone number (optional):
	Secretary of State use only
gnature:	g'Corpulomistain forms/tabn.p66 Revised 04/2003
(see instruction # 8 on back of form)	IDAHO SECRETARY OF S

CK: 2589 CT: 158010 RH: 954343 1 8 25.00 = 25.00 ASSUN NAME # 2