

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

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

(see instruction #8 on back of form)

SEL HIARY OF STATE STATE OF IDAHO

	STATE OF ILMIO
The assumed business name which the undersigned business is:	use(s) in the transaction of
NEST	
2. The true name(s) and <u>business</u> address(es) of the enti- business under the assumed business name: Name Tanct Barton Po	ity or individual(s) doing Complete Address 13 (a Bellowe FO 83313)
3. The general type of business transacted under the assumed business name is:	
Retail Trade	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 Phone number (optional):
	Secretary of State use only
Signature:	IDAHO SECRETARY OF STATE 97/16/2092 95:00 CK: 171 CT: 161925 BH: 477282 1 0 20.00 = 20.00 ASSUM NAME # 2

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