



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
2005 JUN 16

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:

"CAPTURED" PORTRAITS IN PENCIL

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

Name	Complete Address
<u>SUZANNE FARACA</u>	<u>12418 W. PARKVIEW DR.</u>
	<u>POST FALLS, IDAHO</u>
	<u>83854</u>

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 \$25.00 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:

SUZANNE FARACA
12418 W PARKVIEW DR.
POST FALLS, IDAHO 83854

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

Phone number (optional):

Signature:

Suzanne Faraca
(signature required)

Printed Name:

SUZANNE FARACA

Capacity/Title:

OWNER

(see instruction # 8 on back of form.)

Secretary of State use only

a form for mslab, for mslab, p65 Revised 04/03

IDAHO SECRETARY OF STATE
07/11/2005 05:00
CK: 1729 CT: 158018 BH: 828356
1 @ 25.00 = 25.00 ASSUM NAME # 2

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