

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

**FILED**



To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name

99 JUN 16 PM 2:18

SECRETARY OF STATE  
STATE OF IDAHO

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

SPLASH

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

Name	Complete Address
<u>CANDICE LYNNE TELL</u>	<u>5123 W. NAVAHO COURT</u>
	<u>BOISE, ID 83703</u>

3. The general type of business transacted under the assumed business name is: (mark only those that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Retail Trade        | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade     | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input checked="" type="checkbox"/> Services | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

4. The name and address to which future \_\_\_\_\_ Phone number (optional) (208) 853-3417

CANDICE TELL  
SPLASH  
5123 W NAVAHO COURT  
BOISE ID 83703

5123 W. NAVAHO CT., BS, ID  
83703

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

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

Signature:

Candice Lynne Tell

Printed Name:

CANDICE LYNNE TELL

Capacity:

OWNER

(see instruction # 8 on back of form)

Revision 2/87

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Secretary of State use only

IDAHO SECRETARY OF STATE

06/16/1999 09:00  
CR: 5062 CT: 116896 IN: 226297

10 20.00 = 20.00 ASSUM NAME 12

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