

CERTIFICATE OF

ASSUMED BUSINESS NAME P - 1 AM 9: 14
Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name And State of Assumed Business Name And S

Please type or print legibly.

STATE OF IDAHO

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

Rugs b	by Design
The true name(s) and business address(es business under the assumed business name Name TinaMarie Bell	
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	nder the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: TinaMarie Bell 9276 Finucane Drive Hayden, ID 83835	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgme copy is (# other than # 4 above). 	Phone number (optional): 208-762-5100
	Secretary of State use only
rinted Name: Owner	IDAHO SECRETARY OF STATE IDAHO SECRETARY OF

IDAHO SECRETARY OF STATE @9/@1/2004 @5:00 CK: 2733 CT: 150010 BH: 764827 1 & 25.00 = 25.00 ASSUM NAME # 2