



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

12 APR 19 AM 8:43

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Rift Studios Photography

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

Brooke Lloyd

1237 N 55 E

Hollis Lloyd

Idaho Falls, ID 83401

3. The general type of business transacted under the assumed business name is:

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

Submit Certificate of
Assumed Business
Name and **\$25.00** fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Brooke Lloyd

541 N Lewis Lane

Rigby, ID 83442

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

Signature: Brooke Lloyd

Printed Name: Brooke Lloyd

Capacity/Title: Owner

Signature: Hollis Lloyd

Printed Name: Hollis Lloyd

Capacity/Title: Owner

Secretary of State use only

IDAHO SECRETARY OF STATE
04/19/2012 05:00
CX: 1053 CT: 269471 BH: 1320450
1 @ 25.00 = 25.00 ASSUM NAME # 2

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