

CERTIFICATE OF ASSUMED BUSINESS NAME

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)

FILED EFFECTIVE

09 SEP 14 AM 9: 04

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the unc	dersigned use(s) in the transaction of
business is: Reflections St	tudio
The true name(s) and business address(es) business under the assumed business nam	
Christa Rice	256 Rosovelt Rd
	Bonners Ferry eld 83805
3. The general type of business transacted un	nder the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction	n and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:	Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080
256 Rossielt Rd. BF 41d. 83805	(208) 334-2301
 Name and address for this acknowledgme copy is (if other than # 4 above). 	ent Santa Sant
	Secretary of State use only
Signature: (signature required)	forms/abri, p65
Printed Name: <u>Christa Rice</u> Capacity/Title: <u>Oumar</u>	Security of State IDAHO SECRETARY OF STATE 19/14/2009 95:00 CK: 3105 CT: 156016 BH: 1106878

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