Printed Name:

Capacity/Title:________

(see instruction # 8 on back of form)

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.

: See instructions on reverse before filling

1. The assumed business name which the under business is: Thee Bears Log	turniture
2. The true name(s) and business address(es) or business under the assumed business name: Name	f the entity or individual(s) doing Complete Address 40386 300 W Righy Jel 33414
3. The general type of business transacted under Retail Trade	

IDAHO SECRETARY OF STATE 05/19/2008 05:00 CK: 231 CT: 158010 BH: 1115623 1 8 25.00 = 25.00 ASSUM HAME # 2

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