## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the pursuant to Section 54-504, Idaho Code, Idah

	gives notice of adoption of an A	
1.	The assumed business name which the unbusiness is:	
	SCHELL PHO	TOGRAPHY
<ol><li>The true name(s) and business address(es) of the entity or individual(s) business under the assumed business name is/are:</li></ol>		
	<u>Name</u>	Complete Address
	MICHAEL F. SCHELL	10280 SENECA DR.
	KATHRYN R. SCHELL	BOISE, 10 83709
3.	The general type of business transacted ur (mark only those that apply)	nder the assumed business name is:
	☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	g
4.	The name and address to which future correspondence should be addressed:	Phone number (optional): (208) 362-7652
	SAME AS ABOVE	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
		Secretary of State use only
Sianatu	ire: Michael F. Schell	IDAHO SECRETARY OF STATE  05/15/2000 09:00  CK: 5304 CT: 131068 BH: 317727
	Name: MICHAEL F. SCHELL	1 8 28.88 = 28.80 ASSUM NAME # 2
	ty: OWNER / PHOTOGRAPHER	580 udeks
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(see instruction # 8 on back of form)

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