



# CERTIFICATE OF ASSUMED BUSINESS NAME

Title 30, Chapter 21, Part 8, Idaho Code.  
Filing fee: \$25.00.

**FILED EFFECTIVE**

2017 MAR 21 AM 10:04  
SECRETARY OF STATE  
STATE OF IDAHO

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

JUST IMAGINE CONCIERGE AND EVENT PLANNING

2. The individual and/or entity names and business address(es) of those doing business under the assumed business name (do not include the name you listed in #1):

ANTHONY K. HORTON 10053 W. HARVESTER DRIVE, BOISE ID 83709  
(Name) (Address)

(Name) (Address)

(Name) (Address)

(Name) (Address)

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

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

4. Mailing address for future correspondence:

ANTHONY K. HORTON  
(Name)  
10053 W. HARVESTER DR.  
(Address)  
BOISE, ID 83709  
(City) (State) (Zipcode)

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

\_\_\_\_\_  
(Name)  
\_\_\_\_\_  
(Address)  
\_\_\_\_\_  
(City) (State) (Zipcode)

Printed Name: ANTHONY K. HORTON

Signature: Anthony K. Horton

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
03/21/2017 05:00  
CK:CASH CT:158010 BH:1574760  
10 25.00 = 25.00 ASSUM NAME #2

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