2 <u>27</u>	
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.	
 1. The assumed business name which the undersigned use(s) in the transaction of business is: Michele's City Ughts 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 Michele Ann Smith 124 Charles Pl Pacyello ID 83201 	
 3. The general type of business transacted under the service of the serv	he assumed business name is:
	Secretary of State use only
Signature: <u>Michele A. Smith</u> Capacity/Title: <u>Owner</u> (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 06/21/2004 05:00 CK: 4358 CT: 158010 BH: 751628 1 0 25.00 = 25.00 Assum Mame # 2
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