



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.

FILED 2006 MAY -5 AM 9:19

SECRETARY OF STATE
STATE OF IDAHO

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

Top 2 Bottom

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
Karmen Horkley	509 12th Ave Rd. Nampa, Id 83686
Patricia Niece	509 12th Ave. Rd. Nampa, Id 83686

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

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

4. The name and address to which future correspondence should be addressed:

Patricia Niece
516 Ohio Ct.
Nampa, Idaho 83686

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

Signature: Patricia Niece

(signature required)

Printed Name: Patricia Niece

Capacity/Title: Partner

(see instruction # 8 on back of form)

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Reviewed 04/2003

Secretary of State use only

10995-47

IDaho SECRETARY OF STATE
05/05/2006 05:00
CK: 305 CT: 199964 BH: 953105
1 @ 25.00 = 25.00 ASSUM NAME # 2