



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.

07 AUG 10 AM 9:05

SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE
AM 9:05
OF STAFF

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

Caged Clothing

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Name
Chad King
Stefanie King

Complete Address

437 Canyon Crest Dr. W. Twin Falls, Id 83301
437 Canyon Crest Dr. W. Twin Falls, Id 83301

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ Finance, Insurance, and Real Estate
- Submit
 Assume
 Name &

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

Chad King
437 Canyon Crest Dr. West
Twin Falls, Id 83301

**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:

(signature required)

Printed Name:

Chad King

Capacity/Title:

Owner/President

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
08/10/2007 05:00
CK: 227 CT: 158010 BH: 1069988
1 @ 25.00 = 25.00 ASSUM NAME # 2

D114068