## 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.

(see instruction # 8 on back of form)

FILED EFFECTIVE

2009 JUL 12 P年41

SECRETARY OF STATE
STATE OF IDAHO

CK: CASH CT: 158010 BH: 755120 @ 25.00 = 25.00 ASSUM NAME # 2

NOTE: See instructions on reverse before f	iling. STATE OF IDAHO
The assumed business name which the undersigned use(s) in the transaction of business is:      The assumed business name which the undersigned use(s) in the transaction of business is:	
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
Sally Sovan = =	1553 West Chandra Lane, Boise ID 83705
3. The general type of business transacted under the assumed business name is:	
Retail Trade	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  Phone number (optional):  (205) 794-1017
	Secretary of State use only
Signature: Sally Swam  Printed Name: Sally Swam	Revised 04/2003
Capacity/Title: OWNER	TIANA CEPOETADY OF STATE