

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

## FILED/EFFECTIVE

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.

112 OCT 25 PH 3: 42 STATE OF IDAHO

| 1. The assumed business name which the und  | dersigned use(s) in the transaction of   |
|---|--|
| business is: Lady Moon A  | Apparel  |
| 2. The true name(s) and business address(es) business under the assumed business name:  Name  Patricia Wagstaff  3. The general type of business transacted under the assumed business address(es) of | Complete Address  3440 Tiger Lily Dr. Boise 1D  937/6  |
| Retail Trade Transportation Wholesale Trade Construction  | and Public Utilities   |
| Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate   | Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:   |
| 4. The name and address to which future correspondence should be addressed:   | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  |
| 5. Name and address for this acknowledgmen copy is (if other than #4 above):  Same as #2  | nt Phone number (optional): 208 343-4015   |
|   | Secretary of State use only  |
| Signature: Patricia Wagstaff  Printed Name: Patricia Wagstaff  Capacity/Title: OWNER  | IDAFU SECRETARY OF STATE   16/25/2002 @5:00   10/ |
| (see instruction # 8 on back of form)   | D594/8   |