

227



# 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.**

**Instructions are included on back of application.**

## FILED EFFECTIVE

2011 FEB -2 AM 9:34

SECRETARY OF STATE  
STATE OF IDAHO

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

KIMBRY STUDIOS

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

KIMBERLY CLAWSON

505 LAUREL STREET, REXBURG, ID 83440

BRYAN CLAWSON

505 LAUREL STREET, REXBURG, ID 83440

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

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

505 LAUREL STREET, REXBURG, ID 83440

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

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

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Signature: [Signature]

Printed Name: KIMBERLY CLAWSON

Capacity/Title: CO-OWNER

Signature: [Signature]

Printed Name: BRYAN CLAWSON

Capacity/Title: CO-OWNER

Secretary of State use only

IDAHO SECRETARY OF STATE  
02/02/2011 05:00  
CK: 597584 CT: 172899 BH: 1258847  
1 @ 25.00 = 25.00 ASSUM NAME # 2

abnprmd Rev 07/2010

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