

CERTIFICATE OF ASSUMED BUSINESS NAME Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

7814 HAY 2! PH 2: 10

SECRETARY OF HARE STATE OF HOARD

| | Please type or print legibly. Instructions are included on back of app | plication. | | |
|--|--|---------------------------|---|--|
| 1. | The assumed business name which the ur business is: | ndersigne | ed use(s) in the transaction of | |
| | BEAUTIFUL MELODY DESIGNS | | | |
| 2. | The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: | | | |
| | Name | | Complete Address | |
| | CHANTAL N WAIDE | 722 E WHISPERING PINES LN | | |
| | | COEUR | D ALENE ID 83815-5171 | |
| 3. | The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining | | | |
| | Finance, Insurance, and Real Estate | | Assumed Business Name and \$25.00 fee to: | |
| 4. | The name and address to which future correspondence should be addressed: CHANTAL N WAIDE 722 E WHISPERING PINES LN COEUR D ALENE ID 83815-5171 | | Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301 | |
| 5. | Name and address for this acknowledgmer copy is (if other than # 4 above): | nt | | |
| Signa | ture Chantal Wait | | Secretary of State use only | |
| • | , 303000 | | IDAMO SECRETARY OF STATE | |
| Printed Name; CHANTAL N WAIDE Capacity/Title; OWNER | | | 05/21/2014 05:00 | |
| • | ture: | | CK:1908470 CT:172093 BH:1425 10 25.00 = 25.00 ASSUM NAME | |
| | d Name: | | | |
| | city/Title: | | D171386 | |

9/21/2012

abr.pmd Rev. 07/2010