

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.

OL JAN 22 PH 1:43

SECRETARY OF STATE STATE OF IDAHO

 The assumed business name which the und business is: The Family Room 	ersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) obusiness under the assumed business name: Name Donna C Turnbor	Complete Address
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed:	der the assumed business name is: and Public Utilities Submit Certificate of Assumed Business Name and \$20.00 fee to: Secretary of State 700 West Jefferson Basement West
Denna Turabec 23484 Texas Rd Caldwell, ID 83/co7 5. Name and address for this acknowledgmen copy is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional): 208-459-8280
Signature: Danna Turnbad Printed Name: Danna Turnbad Capacity: OWNYT (see instruction # 8 on back of form)	Secretary of State use only 1002