Capacity/Title:

FILED EFFECTIVE **CERTIFICATE OF** ASSUMED BUSINESS NAMEL AN 9:08

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name OF STATE

Please type or print legibly.

Instructions are included on back of application.

Papillon	n Promotions
 The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: 	
<u>Name</u>	Complete Address
Terri Bearden	Papillon Promotions
	PO Box 2585
	Orofino, ID 83544
The general type of business transacted u Retail Trade Transportatio Wholesale Trade Construction	on and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed: Papillon Promotions	Secretary of State 450 North 4th Street PO Box 83720
PO Box 2585	Boise ID 83720-0080 208 334-2301
Orofino, ID 83544	200 004-2001
5. Name and address for this acknowledgme copy is (if other than #4 above):	ent
nature: Mrs Blarden	Secretary of State use only
ted Name: Terri Bearden	
acity/Title: Owner	
ature:	IDANO SECRETARY OF STATE
	05/04/2012 05: CK: 1134 CT: 270070 8H: 132
ed Name:	1 0 25.00 = 25.00 ASSUM

abri.pmd Rev. 07/2010

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