



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.

2002 JAN -9 AM 9:29

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

PERSONAL PROPERTY SALES & Inventory

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

JAN E. EMMICK

2016 LAKESHORE DR, SAGLE, ID 83860

BONNIE L. PRICE

P.O. Box 760, SAGLE, ID 83860

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/>	Retail Trade	<input type="checkbox"/>	Transportation and Public Utilities
<input type="checkbox"/>	Wholesale Trade	<input type="checkbox"/>	Construction
<input checked="" type="checkbox"/>	Services	<input type="checkbox"/>	Agriculture
<input type="checkbox"/>	Manufacturing	<input type="checkbox"/>	Mining
<input type="checkbox"/>	Finance, Insurance, and Real Estate		

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

JAN E. EMMICK

2016 LAKESHORE DR.

SAGLE, ID. 83860

Submit Certificate of
Assumed Business
Name and **\$20.00** fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

208-263-8758

Signature: JAN E. EMMICK
(signature required)

Printed Name: JAN E. EMMICK

Capacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 09/2002

Secretary of State use only

IDAHO SECRETARY OF STATE
01/09/2003 05:00
CK: 1857 CT: 158818 BH: 655699
1 F 20.00 = 20.00 ASSUM NAME # 2

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