

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

Gracie's Art Corner	
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u> Ester G. Fairchild	
	Oldtown, Idaho 83822
Retail Trade Transporta Wholesale Trade Construct Services Agricultur Manufacturing Mining Finance, Insurance, and Real Es The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State
Gracie's Art Corner	PO Box 83720
3767 Hoo Doo Loop Rd	Boise ID 83720-0080 208 334-2301
Oldtown, Idaho 83822	
5. Name and address for this acknowledge copy is (if other than # 4 above):	gment —
nature: Skept Sant	Secretary of State use only
nted Name: Ester G. Fairchild	IDAHO SECRETARY OF
pacity/Title: Owner	02/23/2015 05

CK:4003 CT:306727 BH:1462919 16 25.00 = 25.00 ASSUM NAME #2

District Control

D176990

Signature:

Printed Name:

Capacity/Title:___