

FILED EFFECTIVE

227



# 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 filling.

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

All the Write Words

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Shelly A. Hines

Complete Address

5756 N. Toulon Dr., Coeur d'Alene, ID 83815

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:

Shelly A. Hines, All the Write Words

5756 N. Toulon Dr.

Coeur d'Alene, ID 83815

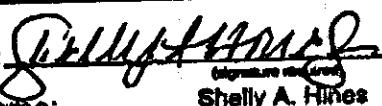
Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Idaho Secretary of State  
450 N 4th Street  
P.O. Box 83720  
Boise ID 83720-0080

(208) 334-2301

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

Same

Signature: 

Signature recorded

Shelly A. Hines

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_ Owner

(see instruction # 8 on back of form)

Secretary of State use only

RECEIVED  
RECORDED  
RECORDED

IDAHO SECRETARY OF STATE  
09/18/2007 05:00  
CK: 1268439 CT: 172699 MH: 1676219  
1 # 25.00 = 25.00 ASSUM NAME # 2

D115185