



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO, JUL 21 AM 8:46
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name. STATE

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

ALIKA PRODUCTIONS

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

Name	Complete Address
<u>Alice Kathryn Wright</u>	<u>4974 E 105 N</u>
<u></u>	<u>Idaho Falls, Idaho</u>
<u></u>	<u>83401</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

4. The name and address to which future correspondence should be addressed: Phone number (optional): _____

Alice Kathryn Wright
4974 E 105 N
Idaho Falls, Idaho 83401

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

n/a

Signature: Alice Kathryn Wright

Printed Name: Alice Kathryn Wright

Capacity: owner

(see instruction # 8 on back of form)

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

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

Secretary of State use only

IDAHO SECRETARY OF STATE
07/21/2004 05:00
CK: 332 CT: 150018 BH: 756676
1 @ 25.00 = 25.00 ASSUM NAME # 2

Revision 1/98
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