

Capacity/Title:

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAMENGV 24 AM 9: 35

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

Please type or print legibly.

STATE OF TOYOFSE before filing. Pursuant to Section 53-504, Idaho Code, the undersigned

NOTE: See instructions on reverse before filing.

Silver Valley Lotions Potions & More	
The true name(s) and business address(es business under the assumed business nam Name Lyle H Chipperfield	•
	Kellogg, ID 83837
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: Lyle H Chipperfield	Submit Certificate of Assumed Business Name and \$25,00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720
220 East Cameron Avenue	Boise ID 83720-0080 208 334-2301
Kellogg, ID 83837Name and address for this acknowledgme copy is (if other than # 4 above).	
	Secretary of State use only
gnature: Sylve H. Chipperfield	TIDAHO SECRETARY OF STA

11/24/2006 05:00 CK: 18148 CT: 158010 BH: 1015211 1 8 25.00 = 25.00 ASSUM NAME # 2