



# 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 filing.**

FILED/EFFECTIVE  
02 JAN 22 AM 10:30  
STATE OF IDAHO

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

CANDLEHAUS

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

ANNA GOODIN

P.O. BOX 261, HOPE, IDAHO, 83836

GERALD H. GOODIN

P.O. BOX 261, HOPE, IDAHO, 83836

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

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade             | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input type="checkbox"/> Services                            | <input type="checkbox"/> Agriculture                         |
| <input checked="" 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:

ANNA GOODIN

GERALD H. GOODIN

P.O. BOX 261, HOPE, IDAHO, 83836

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) 264-0271

Secretary of State use only

Signature: Anna Goodin

Printed Name: ANNA GOODIN

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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Revised 01/2001

IDAHO SECRETARY OF STATE  
01/22/2002 05:00  
CK: 1802 CT: 156087 BH: 441493  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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