## CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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

2014 AUG -8 AM 8: 31

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

SECREMAY OF STATE
STATE OF IDAGO

1.	The assumed business name which the under business is:  LACQUER'D UP No	
2.		f the entity or individual(s) doing  Complete Address  Col Parkmont Way  aldwell, Idaho 83605
3.	The general type of business transacted under Retail Trade Transportation and Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	strict the assumed business name is:  and Public Utilities  Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed:  Brekke Elizabeth  201 Farkmont Way  Caldwell Idaho 83605	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State use only
Printe Capa	ed Name: Brekke Elizabeth Uine city/Title: Owner ture:	IDAHO SECRETARY OF STATE  08/08/2014 05:00  CK:2124400 CT:172099 BH:1436621 10 25:00 = 25:00 ASSUM NAME #2

Rev. 07/2010

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Printed Name: \_ Capacity/Title: \_