

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

## FILED EFFECTIVE

10 DEC -2 AM 8: 35

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

SECRED RY OF STATE STATE OF IDAHO

	Pa	sintcraft
business unde	(s) and <u>business</u> address(e the assumed business na <u>Name</u>	es) of the entity or individual(s) doing me: <u>Complete Address</u> 1018 East E. St. Moscow ID 83843
Retail Tra Wholesa Services Manufact	ade	Submit Certificate of Assumed Business
	address to which future e should be addressed:	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and add copy is (if other that	ress for this acknowledgme	ent
gnature:	2	Secretary of State use only
inted Name: Dana	6. Dawes	
apacity/Title: <u>owner</u> gnature:		IDAHO SECRETARY OF STATE 12/02/2010 05:00 CK: 10768 CT: 158010 BH: 1249125 1 8 25.00 = 25.00 ASSUM NAME #
		D143758