

FILED EFFECTIVE



# 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.

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

B & R Candles

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

BONNIE L. ROWE

448 BUCHANAN TWIN FALLS, ID 83301

ROSALIE D. EBERHARD

257 4<sup>TH</sup> AVE W WENDEN, ID 83355

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

- ☒ Retail Trade  
☐ Wholesale Trade  
☐ Services  
☐ Manufacturing  
☐ Finance, Insurance, and Real Estate

- ☐ Transportation and Public Utilities  
☐ Construction  
☐ Agriculture  
☐ Mining

4. The name and address to which future correspondence should be addressed:

BONNIE L. ROWE

448 BUCHANAN

TWIN FALLS, ID 83301

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

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

Phone number (optional):

(208) 733-7167

Secretary of State use only

Signature:

Bonnie L. Rowe

(signature required)

Printed Name:

BONNIE L. ROWE

Capacity/Title:

PARTNER

(see instruction # 8 on back of form)

g:\corporation\forms\abn.p65  
Revised 11/1/2003

IDAHO SECRETARY OF STATE  
06/22/2005 05:00  
CK: 7605 CT: 150010 BH: 017471  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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