

Capacity/Title:

tartner

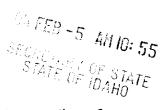
(see instruction # 8 on back of form)

## **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.

Please type or print legibly. NOTE: See instructions on reverse before filing.



	ייים
1. The assumed business name which the undersigned	ed use(s) in the transaction of
business is:	and Comments -
DANCE The Competition	LUNCE LUNVERTION
2. The true name(s) and <u>business</u> address(es) of the	entity or individual(s) doing
business under the assumed business name:	,
Name	Complete Address
Harkus Fipps 1405	S. Cobblestone Eagle 83611
Carol Fipps Sam	ne as above
Chris Payne Dupre 500	S. Cobblestone Eagle 83611 ne as above S. Fitness Pl. Eagle 83611
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<ol><li>The general type of business transacted under the</li></ol>	assumeu pusiness name is:
Retail Trade Transportation and Po	ublic Utilities
Wholesale Trade Construction	
Services	Submit Certificate of
Manufacturing Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and <b>\$25.00</b> fee to:
4. The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
Carol Fions	Basement West PO Box 83720
140 S. Cobblestone Way	Boise ID 83720-0080
Egale, Idaho 83666	208 334-2301
	Phono number (= 11 = n)
5. Name and address for this acknowledgment	Phone number (optional):
COPY IS (if other than # 4 above).	
	Secretary of State use only
50	ヘヘハローン
gnature: (signature fequired) 500 years would have small from	D18859
nted Name: Cavol 5:005	IDAHO SECRETARY OF STATE
inted Name: Cavol Frons	02/05/2004 05:00

02/05/2004 05:00 CK: 25195522717SLD CT: 172099 BH: 725772 1 8 25.90 = 25.00 ASSUM NAME # 2