



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

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

EASY LIVING FURNITURE & INTERIORS

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name	Complete Address
<u>HUSBAND & WIFE</u>	
<u>PAUL ALLEN FISHER</u>	<u>290 FILER AVE W #15</u>
<u>JANET DEVEE FISHER</u>	<u>TWIN FALLS, ID 83301-4670</u>

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input checked="" type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-735-8460

P.O. Box 283
TWIN FALLS ID 83303-0283

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

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

SIGNATURE: JANET DEVEE FISHER

PRINTED NAME: JANET DEVEE FISHER

CAPACITY: PROPRIETOR INTERIOR DECORATOR

Signature: Paul Allen Fisher

Printed Name: PAUL ALLEN FISHER

Capacity: PRESIDENT & CEO

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

09/28/2000 09:00
CK: 1439 CT: 1365% BH: 351312

1 @ 20.00 = 20.00 ASSUM NAME # 2

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