

Capacity/Title:

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

1 NOV -7 AM 9:4

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

1. The assumed business name which the undersigned use(s) in the transaction of business is: Sand Creek Upholstery 2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name ammy J. Newcomb P.O. Box 414 Kootenai, Id 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture X Services Submit Certificate of Mining Manufacturing Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to: 4. The name and address to which future Secretary of State correspondence should be addressed: 450 North 4th Street PO Box 83720 ammu. J. Newcomb Boise ID 83720-0080 BUX 414 208 334-2301 83340 Kootenay Id. 5. Name and address for this acknowledgment CODY IS (if other than # 4 above). Secretary of State use only Signature: Printed Name: Capacity/Title: Dwner Signature: IDANO SECRETARY OF STATE /07/2011 05:00 1524 CT: 158810 BH: 1297237 Printed Name:

abn.pmd Rev. 07/2010

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