227



## 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.

2014 DEC 31 PM 2: 52

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

SEC. FIANY OF STAFE STATE OF IDAHO

The bus	true name(s) and <u>business</u> address(e iness under the assumed business na	s) of the er me:	ntity or individual(s) doing
	<u>Name</u>		Complete Address
An	iber Hobbies & Crafts Incorporated	939 S. 25	th East, Ammon, ID 83406
	(C203801)		
_			
The	The general type of business transacted under the assumed business name is:  Retail Trade  Transportation and Public Utilities		
	Wholesale Trade Construction		
	Services Agriculture	•	
<u> </u>			Submit Certificate of
L	Manufacturing		Assumed Business
	Finance, Insurance, and Real Estate	•	Name and <b>\$25.00</b> fee to:
The	name and address to which future		Speratory of State
	espondence should be addressed:		Secretary of State 450 North 4th Street
	S. 25th East Ammon, ID 83406		PO Box 83720
	C. Boar Edot Allandin to Obrido		Boise ID 83720-0080
			208 334-2301
		L	
	ne and address for this acknowledgme	ent	
cop	y IS (if other than # 4 above):		
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IDAHO SECRETARY OF STATE

01/02/2015 05:00

CK:2464512 CT:172099 BH:1455144 1@ 25.00 = 25.00 ASSUM NAME #2

abn prind Rev. 07/201

Capacity/Title: President

Signature:

Printed Name:

Capacity/Title: