



CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED

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 of business is:

CAROLYN ESPINOZA DESIGNS

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 CAROLYN ESPINOZA Complete Address 1808 S. KERR ST. BOISE 83705

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

☒ Retail Trade ☐ Manufacturing ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Agriculture ☐ Finance, Insurance, and Real Estate
☐ Services ☐ Construction ☐ Mining

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

Phone number (optional): 208-424-0318

CAROLYN ESPINOZA
1808 S. KERR ST.
BOISE, ID. 83705

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

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

Signature:

CAROLYN ESPINOZA

Printed Name:

CAROLYN ESPINOZA

Capacity:

Owner

(see instruction # 8 on back of form)

Secretary of State - use only

11/10/1999 09:00
CK: 2386 CT: 122817 BH: 265185

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revision 1/98

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