## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

SEI



	To the SECRETARY OF STATE, STATE OF IDAHO P 25   5 pulsuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.		
SECT.	The assumed business name which the undersigned of business is:  Capitol City Boo		
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:    Old   Name   Complete Address   Co		
	3. The general type of business transacted under the assumed business name is:  (mark only those that apply)  Retail Trade		
5	Capitol City Bookkeeping 4703 N. Anchor Way Boise 10 83703  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	
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Signature:

Printed Name:

Capacity:\_

(see instruction # 8 on back of form)

09/25/1997 09:00 CK: CRSH CT: 87723 BH: 41854

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