



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.

2008 MAY 12 AM 9:50

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE
STATE OF IDAHO

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

BLUE MOON TRINKETS & TREASURES

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

Name

Complete Address

SONYIA R. CUMMINGS

205 1/2 NO. GALENA

PO BOX 159

COUNCIL, IDAHO 83612

3. The general type of business transacted under the assumed business name is:

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

Submit Certificate of Assumed Business Name and \$25.00 fee to:

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

SONYIA R. CUMMINGS

PO BOX 159

COUNCIL, IDAHO 83612

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

SAME

Signature:

Sonyia R. Cummings
(signature required)

Printed Name:

Sonyia R. Cummings

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

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Revised 04/2003

Secretary of State use only

IDAHO SECRETARY OF STATE
05/12/2008 05:00
CK: 110658 CT: 172099 BH: 1114510
I @ 25.00 = 25.00 ASSUM NAME # 2

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