

CERTIFICATE OF ASSUMED BUSINESS NAME



Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

It Fig	gures
The true name(s) and business address(es) business under the assumed business name Name It Figures L.L.C.	` ` ` ` ` <u> </u>
W20237	
	der the assumed business name is:
 Wholesale Trade ☐ Construction ✓ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate 	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed: Shelly Wright 340 S. 4th Ave. Pocatello, ID 83201	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledgmer copy is (if other than # 4 above): Shelly Wright 	Phone number (optional): (208) 317-6063
201 Lee St. Apt C-104 American Falls, ID 83211	Secretary of State use only
ignature: Suelly W.u.g.ut (righature required) rinted Name: Shelly Wright	100002 1

1 @ 20.00 = 20.00 ASSUM NAME # 2

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