



# 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.  
Instructions are included on back of application.

2013 JAN-4 AM 9:00  
 SECRETARY OF STATE  
 STATE OF IDAHO

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

Grunewald Glass Works

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

| <u>Name</u>                   | <u>Complete Address</u>   |
|-------------------------------|---------------------------|
| <u>Melinda G.M. Grunewald</u> | <u>1211 So. Taylor St</u> |
|                               | <u>Nampa ID 83686</u>     |
|                               |                           |
|                               |                           |

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

|   |                                     |
|---|-------------------------------------|
| <input checked="" type="checkbox"/> Retail Trade  | Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade          | Construction                        |
| <input type="checkbox"/> Services                 | Agriculture                         |
| <input checked="" type="checkbox"/> Manufacturing | Mining                              |
| Finance, Insurance, and Real Estate               |                                     |

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

1211 So. Taylor St.  
Nampa ID 83686

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

Secretary of State  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

\_\_\_\_\_  
 \_\_\_\_\_

Signature:

Melinda G.M. Grunewald

Printed Name: Melinda G.M. Grunewald  
 Capacity/Title: Owner

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
 01/04/2013 05:00  
 CK: 11697 CT: 131994 BH: 1354155  
 1 @ 25.00 = 25.00 ASSUM NAME # 2

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