



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.

FILED EFFECTIVE
2003 DEC -8 AM 9:29
SECRETARY OF STATE
STATE OF IDAHO

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

Cherished Memories

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

Keith A Witten

126 Goodall St Mountain Home ID 83647

Diana Witten

126 Goodall St Mountain Home ID 83647

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

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

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

Keith A Witten

126 Goodall St

Mountain Home ID 83647

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

Phone number (optional):

(208) 587-9383

Signature:

(signature required)

Printed Name: Keith A Witten

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\comp\forms\abn forms\abn.p65
Revised 04/2003

IDAHO SECRETARY OF STATE
12/09/2003 05:00
CK: 1888 CT: 158810 BH: 715647
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 71232