



# 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.

06 JAN -4 AM 11: 52

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:

Notes from Lori's Cabin

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

Name

Lori M. Harmon

Complete Address

1478 E. 4000 N.

*Buhl 83316*

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

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

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

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

1478 E 4000 N.

Buhl, Idaho

83316

Phone number (optional):

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

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

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Revised 04/2003

Secretary of State use only

Signature: Lori M. Harmon  
(signature required)  
Printed Name: Lori M. Harmon  
Capacity/Title: owner

(see instruction # 8 on back of form)

01/04/2006 05:00  
CK: 5720 CT: 158018 BH: 930015  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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