



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

98 DEC - 1 AM 8:34
SECRETARY OF STATE
STATE OF IDAHO

FILED

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

Mona's Bookkeeping & Tax Service

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

<u>Name</u>	<u>Complete Address</u>
<u>Monica J. Filippone</u>	<u>10189 Payette Hts., Payette, ID 83661</u>
_____	_____
_____	_____

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

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

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

Phone number (optional): (208) 642-3394

Monica Filippone
10189 Payette Hts
Payette, ID 83661

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

Signature: Monica Filippone

Printed Name: Monica Filippone

Capacity: sole proprietor

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

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

Secretary of State use only
IDAHO SECRETARY OF STATE

12/01/1998 09:00
CK: 3785 CT: 107449 BH: 165930

1 @ 20.00 = 20.00 ASSUM NAME # 2

D20398

Revision 1/98

g:\corpforms\statn.p65