

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.

11 NOV -7 AM 10: 36

Please type or print legibly.

Instructions are included on back of application.

STATE OF STATE

The assumed business name which the unbusiness is:	
2. The true name(s) and <u>business</u> address(est business under the assumed business name Name Lovelue Botto	· · · · · · · · · · · · · · · · · · ·
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: ORA INE BOTH MERIOIAN ID 83646	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):	nt
Signature: Amaric Both	Secretary of State use only
Printed Name: <u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</u>	IDAHO SECRETARY OF STATE 11/07/2011 95:00 CK: 2266 CT: 158810 BH: 1297899 1 0 25.00 = 25.00 ASSUM MANE N 2
Capacity/Title:	1 7,512,20

abn.pmd Rev. 07/2010

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