

## CERTIFICATE OF ASSUMED BUSINESS NAME

ECTIVE
Secretary of State **Business Entities** www.idsos.state.id.us/

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.

(see instruction #8 on back of form)

<ol> <li>The assumed business name which the und business is:</li> </ol>	ersigned use(s) in the transaction of
LOWELY HEART	5
2. The true name(s) and <u>business</u> address(es) business under the assumed business name  Name  JADWISA RADON  3. The general type of business transacted under the assumed business address(es) and business name are properly and business address(es) address(es) and business address(es) addr	Complete Address  3015 N 4th Street #93  COEUR D'ALENE  JD 83815 Ph# 665 985
Retail Trade	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  Phone number (optional):  1-208-665-9854
Signature:	Secretary of State use only    Secretary of State use only