



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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

d/b/a ArtiZen Gallery

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

Michael G Maguire

255 Ernesto Dr. McCall, ID 83638

Judy A. Maguire

" " " " "

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

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:

ArtiZen Gallery

Box 2371

McCall, ID 83638

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

above

Phone number (optional):

Signature: Judy Maguire

(signature required)

Printed Name: Judy Maguire

Capacity/Title: Secretary

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
10/25/2005 05:00
CK: 1808 CT: 158810 BH: 918757
1 @ 25.00 = 25.00 ASSUM NAME # 2

g:\compliance\formalabn.pdf
Revised 04/2003

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