



CERTIFICATE OF ASSUMED BUSINESS NAME

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 filling.

FILED
EFFECTIVE
MARCH - 9 PM 12: 41
SECRETARY OF STATE
STATE OF IDAHO

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

ANTIQUES & INTERIORS

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

<u>Name</u>	<u>Complete Address</u>
<u>ANNE HOLTON</u>	<u>1051 WILLOW LAKE LOOP</u>
<u>THOMAS HOLTON</u>	<u>COEUR D'ALENE, ID. 83815</u>
	<u>1051 WILLOW LAKE LOOP</u>
	<u>COEUR D'ALENE, ID. 83815</u>

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	

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

TOM & ANNE HOLTON
217 W. CANFIELD AVE. #13
COEUR D'ALENE, ID. 83815

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

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):

Secretary of State use only

Signature: Anne Holton
(signature required)

Printed Name: ANNE HOLTON

Capacity/Title: OWNER

(see Instruction # 8 on back of form)

Idaho Form 500
Revised 4/2003

IDaho SECRETARY OF STATE
02/09/2007 05:00
CK: 525 CT: 158818 BH: 1031959
100 25.00 = 25.00 ASSUM NAME # 2

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