



# 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.**

**Instructions are included on back of application.**

10 SEP -3 AM 8:31  
SECRETARY OF STATE  
STATE OF IDAHO

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

SIMPLY CABINETS

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

LEAH SEALEY

816 GLORIA, CHUBBUCK, ID 83202

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  
450 North 4th Street  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

LEAH SEALEY

816 GLORIA

CHUBBUCK, ID 83202

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

Signature: Leah Sealey

Printed Name: LEAH SEALEY

Capacity/Title: OWNER

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
09/03/2010 05:00  
CK: 92104019 CT: 150010 BH: 1237468  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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