

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

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CERTIFICATE OF ASSUMED BUSINESS Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed Bu Please type or print legibly. NOTE: See instructions on reverse before	NAME ne undersigned usiness Name.
1. The assumed business name which the und business is:  WINN DESIGN  2. The true name(s) and business address(es) business under the assumed business name Name  Amanda Winn  BRIAN Winn  BRIAN Winn  1. The assumed business address(es) business under the assumed business name Name  Amanda Winn  BRIAN Winn  1. The assumed business name which the under business is:  WINN DESIGN  BRIAN Winn  1. The assumed business name which the under business is:  Winn  BRIAN Winn  1. The assumed business name which the under business is:  Winn  BRIAN Winn  Amanda Winn  BRIAN Winn  The assumed business name which the under business is:  Winn  BRIAN Winn  The assumed business address(es) and business address(es) and business name which the under business address(es) and business name which the assumed busi	of the entity or individual(s) doing
3. The general type of business transacted und Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Angula Winn 1233 N Parite Are Winn 1234 Are Winn 1234 Are Winn 1235 N Parite Are Winn 1236 N Parite Are Winn 1237 N Parite Are Winn 1238 N Parite Are Win	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 7.00 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301  Phone number (optional):
Signature: A (signature required)  Printed Name: Amanga Winn  Capacity/Title: President  (see instruction # 8 on back of form)	Secretary of State use only  IDAHO SECRETARY OF STATE  10/12/2004 05:00  CK: 246 CT: 158018 BH: 770669  1 9 25.00 = 25.00 ASSUM NAME # 2

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