



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

## FILED EFFECTIVE

11 MAY 12 AM 8:41

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Olyncia

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

Sandra Ormiston

12912 Dawn Dr. Donnelly, Idaho 83615

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 checked="" type="checkbox"/> Services                 | <input type="checkbox"/> Agriculture                         |
| <input checked="" type="checkbox"/> Manufacturing            | <input type="checkbox"/> Mining                              |
| <input type="checkbox"/> 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:

Sandra Ormiston

12912 Dawn Dr.

Donnelly, Idaho 83615

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

Secretary of State use only

Signature: Sandra Ormiston

Printed Name: Sandra Ormiston

Capacity/Title: Owner

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

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

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

IDAHO SECRETARY OF STATE  
05/12/2011 05:00  
CK: 1966 CT: 258735 BH: 1273385  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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