



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

2013 MAY 22 AM 8:48

Please type or print legibly.

Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

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

Storybook Parties

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

Tancy Sorensen

281 Caswell Ave. W. Trlr. A5

Anastasia VanLeishout

Twin Falls, ID 83301

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input 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 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:

Storybook Parties

281 Caswell Ave. W. Trlr. A5

Twin Falls, Idaho 83301

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

Signature: Tancy Sorensen

Printed Name: Tancy Sorensen

Capacity/Title: Co-Owner

Signature: Anastasia VanLeishout

Printed Name: Anastasia VanLeishout

Capacity/Title: Co-Owner

Secretary of State use only

IDAHO SECRETARY OF STATE

05/22/2013 05:00

CK: 183718921567 CT: 283481 BH: 1374854

1 @ 25.00 = 25.00 ASSUM NAME # 2

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