



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED EFFECTIVE

To the SECRETARY OF STATE, STATE OF IDAHO
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name.

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

Footprints Fine and Performing Arts

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

Name

Complete Address

Cheryl-Ann Rossi Frisoe 1010 E MOUNTAIN AVE
Randy Frisoe CDA, ID 83814

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐ Retail Trade

☐ Manufacturing

☐ Transportation and Public Utilities

☐ Wholesale Trade

☐ Agriculture

☐ Finance, Insurance, and Real Estate

☒ Services

☐ Construction

☐ Mining

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

Phone number (optional): 208 676-1142

Cheryl-Ann Rossi Frisoe
1010 E MOUNTAIN AVE
CDA, ID 83814

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

Signature: Cheryl-Ann Rossi Frisoe

Printed Name: Cheryl Ann Rossi Frisoe

Capacity: Director

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Revision 1/98

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IDAHO SECRETARY OF STATE
12/02/2002 05:00
CK: 2497 CT: 150010 BH: 648787
1 @ 20.00 = 20.00 ASSUM NAME # 2

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