



CERTIFICATE OF ASSUMED BUSINESS NAME

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

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.

FILED/EFFECTIVE
FEB 12 AM 9:26
SECRETARY OF STATE
STATE OF IDAHO

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

LAKE CITY ANTIQUES

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
<u>MICHELLE ALBERT</u>	<u>2795 W. HAYDEN AVE HAYDEN</u>
<u>DOUGLAS ALBERT</u>	<u>" " " ID 83835</u>

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

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

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

LAKE CITY ANTIQUES
414 SHERMAN AVE
COEUR D'ALENE, ID 83835

Phone number (optional): 208-762-4642 ^{Home}
WK - 208-664-6883

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

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

Signature: Michelle Albert

Printed Name: MICHELLE ALBERT

Capacity: _____

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

02/12/2001 09:00
CK: 2492 CT: 142851 BH: 378260

1 @ 20.00 = 20.00 ASSUM NAME # 2

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