

FILED EFFECTIVE

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

2006 SEP -5 PM 4:45

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Mormon Memories

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

Name

Bridget Dalin

Complete Address

PO Box 312 Fairfield, ID 83327

Tracy Dalin

PO Box 312 Fairfield, ID 83327

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 type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

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

Mormon Memories

PO Box 312

Fairfield, ID 83327

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

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

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

Phone number (optional):

Signature:

(signature required)

Printed Name: Bridget Dalin

Capacity/Title: Owner

(see instruction # 8 on back of form)

State of Idaho Form 53-504  
Revised 04/2002

Secretary of State use only

0103424  
IDaho SECRETARY OF STATE  
09/06/2006 05:00  
CK: 984506 CT: 172899 BH: 973693  
1 E 25.00 = 25.00 ASSUM NAME # 2