

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

225 037 27 23 8:49

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

	Heart 'N Sole		
The true name(s) and business address business under the assumed business		., .	
Name Karen Rae Heddens		Complete Address 3884 S Mill Site Ave	
2 The second time of hereing			
The general type of business transacte	ed under the a	ssumed business name is:	
	ation and Pub	olic Utilities	
 Wholesale Trade ☐ Construct ☐ Services ☐ Agricultu ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Est 	re	Submit Certificate of Assumed Business Name and \$25.00 fee to:	
The name and address to which future correspondence should be addressed:	1	Secretary of State 700 West Jefferson Basement West	
Karen Heddens		PO Box 83720	
3884 S Mill Site Ave		Boise ID 83720-0080 208 334-2301	
Boise, ID 83716		200 00 . 200 .	
 Name and address for this acknowled copy is (if other than # 4 above). 	dgment	Phone number (optional):	
		Secretary of State use only	
gnature: NWW A Selection monitority	pytoms/abn forms/abn.p65		
inted Name: Karen R Heddens	forms\u00e4bn form:		
anacity/Title: OWNer	npvform Rev	TRAID SEASETIME ST.	

IDAHO SECRETARY OF STATE 10/27/2005 05:00 CK: 5120 CT: 158010 BH: 919145 1 & 25.00 = 25.00 ASSUM NAME # 2