CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly) To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned of 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:			
		2. The true name(s) and business address(ex business under the assumed business name Refly Chambers	s) of the entity or individual(s) doing ne is/are: <u>Complete Address</u> 3o 6 3 5 North Hwy, 95 Athol, Idaho
			8.3801
The general type of business transacted un (mark only those that apply)	nder the assumed business name is:		
X Retail Trade ☐ Manufacturin ☐ Wholesale Trade ☐ Agriculture X Services ☐ Construction	g		
4. The name and address to which future correspondence should be addressed:	Basement West		
copy is (if other than # 4 above): BC / S Har Care	PO Box 83720 Boise ID 83720-0080 208 334-2301		
30.635 North Hwy. 95	Secretary of State use only		
Athol, Idaho 83801	Revision 2/97		
Signature: Both Chamber	Rev		
Printed Name: Betty Chambers	IDAHO SECRETARY OF STATE		
(see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE 10/12/2001 05:00 CK: 6538 CT: 152385 BH: 423979 1 0 28.80 = 28.80 ASSUM NAME # 2		

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