

Capacity/Title: __

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2012 SEP -5 AM 9: 01

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

	Brighter Star Circulations
The true name(s) and <u>business</u> business under the assumed bu <u>Name</u> Tauris Lapin	address(es) of the entity or individual(s) doing siness name: <u>Complete Address</u> 201 E HARRISON AVE, COEUR D ALENE ID
. world maker.	83814
✓ Retail Trade ☐ Tra ☐ Wholesale Trade ☐ Co ☐ Services ☐ Ag	insacted under the assumed business name is: insportation and Public Utilities instruction griculture ning Submit Certificate of Assumed Business
4. The name and address to which correspondence should be address to address to which the transpondence should be address to the	sessed: Secretary of State 450 North 4th Street PO Box 83720
5. Name and address for this ackn copy is (if other than # 4 above):	owledgment Secretary of State use only
gnature: <u>autus aprin</u> inted Name: <u>TAURUS LAPIN</u>	
apacity/Title: OWNER	
gnature:	IDAHO SECRETARY OF STATE
y	09/05/2012 05:00

abn.pmd Rev. 07/2010

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