

**FILED EFFECTIVE**

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

2009 OCT 13 AM 10: 54

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

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:

HIGH END EBAYERS

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

Name  
ANNA MANGINI

Complete Address  
120 W CAMERON AVE #4

KELLOGG, ID 83837

3. The general type of business transacted under the assumed business name is:

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

ANNA MANGINI  
120 W CAMERON AVE #4  
KELLOGG, ID 83837

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

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

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

AMERICANWEST BANK  
120 RAILROAD AVE  
KELLOGG, ID 83837

Signature: Anna Mangini  
(signature required)

Printed Name: ANNA MANGINI

Capacity/Title: OFFICE MANAGER

(see instruction # 8 on back of form)

Secretary of State use only

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IDAHO SECRETARY OF STATE  
10/13/2009 05:00  
CK: 321611 CT: 172899 BH: 1190087  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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