



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED EFFECTIVE**

2002 SEP 20 AM 8:45

Please type or print legibly.

**NOTE: See instructions on reverse before filing.**

SECRETARY OF STATE  
STATE OF IDAHO

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

Paradise Ridge web Productions

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

Name	Complete Address
<u>Patricia Tilden</u>	<u>3418 Hwy 8 E. Moscow,</u>
	<u>ID 83843</u>

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

- |                                                              |                                                              |
|--------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Retail Trade                        | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade                     | <input type="checkbox"/> Construction                        |
| <input checked="" 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:

Paradise Ridge web Productions  
3418 Hwy 8 E.  
Moscow, ID 83843

Submit Certificate of  
Assumed Business  
Name and **\$20.00** 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):

(208) 883-0937

Signature: Patricia L. Tilden  
(signature required)

Printed Name: PATRICIA L. TILDEN

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\oip\forms\abn forms\abn.p65  
Revised 07/2002

IDAHO SECRETARY OF STATE  
**09/20/2002 05:00**  
CK: 3526 CT: 150010 BH: 489374  
1 @ 20.00 = 20.00 ASSUM NAME # 2

D58433