



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

FILED EFFECTIVE
2004 APR -5 AM 9:45
SECRETARY OF STATE
STATE OF IDAHO

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

Beaded Botanicals

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

Carla J. Fluck

271 9th street Idaho Falls, Id 83404

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

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

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

Beaded Botanicals

271 9th Street

Idaho Falls, Id 83404

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

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

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Phone number (optional):

208-529-8837

Signature: _____

Carla J. Fluck
(signature required)

Printed Name: _____

Carla J. Fluck

Capacity/Title: _____

owner

(see instruction # 8 on back of form)

Secretary of State use only

074979

IDAHO SECRETARY OF STATE
04/06/2004 05:00
CK: 1078 CT: 150010 BH: 737546
1 @ 25.00 = 25.00 ASSUM NAME # 2