

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

101 -8 AM 8:57

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

SECRETARY OF STATE STATE OF IDAHO

	JAHO I I I I I I I I I I I I I I I I I I I
The assumed business name which the undoposition business is: Party Princes	•
2. The true name(s) and <u>business</u> address(es) business under the assumed business name Name Melissa Nicisch	
3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction	der the assumed business name is: and Public Utilities
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Melissa Nielsen 1206 E Hayden St Pocatello 10 83201	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgmen copy is (if other than # 4 above):	t
Signature: Melissa Nielsen	Secretary of State use only
Printed Name: Mclissa Nielsen Capacity/Title: BUSINESS OWNER	
Signature:	
Printed Name: Capacity/Title:	IDANO SECRETARY OF STATE 11/08/2011 05:00 CK: 103 CT: 158010 BH: 1297292 1 0 25.00 = 25.00 ASSUM NAME 0 2

abn.pmd Rev. 07/2010