

FILED EFFECTIVE



# 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.

REC'D FEB 28 AM 9:10  
SECRETARY OF STATE  
STATE OF IDAHO

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

1st Impression Homestaging

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

Name

Terresa L'Hirondelle

Complete Address

602 Colt Lane, Post Falls, ID 83854

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

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

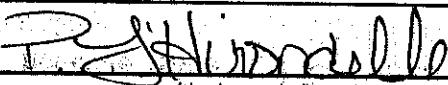
Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

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

602 Colt Lane, Post Falls, ID 83854

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

Signature:   
(signature required)

Printed Name: Terresa L'Hirondelle

Capacity/Title: Owner/Operator

(see instruction # 8 on back of form)

Secretary of State use only

Completion Form 1445  
Revised 12/2002

IDaho SECRETARY OF STATE  
02/29/2008 05:00  
CK: 8976 CT: 223140 BH: 1102026  
1 0 25.00 = 25.00 ASSUM NAME # 2

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