## CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

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	To the SECRETARY OF STATE, ST.  Pursuant to Section 53-504, logives notice of adoption of an	laho Code, th	e undersimed AMIU: 48			
1.	gives notice of adoption of an Assumed Business Name of STATE.  The assumed business name which the undersigned use(s) in the transaction of business is:					
	Final Touch		14 situadd			
2.	The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:					
	Angela Webster	Complete Address 1149 N. 4th St Payette, ID				
	Toby Webster	1149 M	•			
3.	The general type of business transacted (mark only those that apply)	under the assi	umed business name is:			
	☐ Retail Trade ☐ Manufacturin☐ Wholesale Trade ☐ Agriculture☐ ☐ Services ☐ Construction☐	Fir	ansportation and Public Utilities nance, Insurance, and Real Estate ning			
4.	The name and address to which future correspondence should be addressed:	Phone numbe	r (optional): 208-642-7149			
<b>.</b> .	Angela Webster  1149 N. 4th 5th  Payette, ID 83661  Name and address for this acknowledgment copy is (if other than #4 above):	nt	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			
		*	I BANG SECREFARY THE USYATE !			

Signature: Ungela Webster

Printed Name: Angela Webster

Capacity: General Partner

(see instruction # 8 on back of form)

1 # 28.88 = 28.88 ASSUM MAME # 2

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