



**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.

FLUID EFFECTS

2003.JAN-6 AM 9:07

STATE OF IDAHO

Diaper Cakes by Design

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

Name
Karen Stoddart
Debra Glass

Complete Address
1680 N Farming Ave #1 Idaho Falls, ID 83401
2312 E. Chukar Dr. Idaho Falls, ID 83404

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

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

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

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

Diaper Cakes by Design
1080 N Fanning Ave #1
Idaho Falls, ID 83401

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):

208-552-0284

Secretary of State use only

Signature: Karen Stoddart

Printed Name: Karen Stoddart

Capacity/Title: owner

(see instruction # 8 on back of form)

Ergonomics 2022, 65

IDaho SECRETARY OF STATE
01/06/2003 05:00
CK: 2925 CT: 158810 BH: 654767
1 P 20.00 = 20.00 ASSUM NAME # 2

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