

Capacity/Title: __

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.

	Instructions are included on back of ap	plication.	
1.	The assumed business name which the undersigned use(s) in the transaction of business is:		
	Michelle Gillatt Photography		
2.	The true name(s) and <u>business</u> address(est business under the assumed business name Name Michelle Elizabeth Gillatt	s) of the entity or individual(s) doing me: <u>Complete Address</u> 2212 Windancer Ct. Nampa, ID 83686	
3.	The general type of business transacted up Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of	
4.	The name and address to which future correspondence should be addressed: Michelle Elizabeth Gillatt 2212 Windancer Ct. Nampa, ID 83686	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301	
5.	Name and address for this acknowledgmer copy is (if other than # 4 above):	nt	
Signa	ture: Michelle Elipsabeth Alla	Secretary of State use only $\#$	
Printe	d Name: Michelle Elizabeth Gillatt	IDAHO SECRETARY OF STATE	
Capacity/Title:		Ø3/Ø1/2013 Ø5:200 CK: 1032 CT: 280877 BH: 1362590	
Signature:		1 # 25.00 = 25.00 A55UN NAME # C	
Printed Name:		D161406	
Canacity/Title:			