



CERTIFICATE OF ASSUMED BUSINESS NAME

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

11 NOV 10 AM 9:00

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

SECRETARY OF STATE
STATE OF IDAHO

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

Clear Mind Graphics

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

Name

Complete Address

Sarah Murphy

PO Box 904, Bellevue, Idaho, 83313 (MAILING)

9 Wyatt dr., Bellevue ID 83313
(physical)

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 | |

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

PO Box 904

Bellevue, ID 83313

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

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

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Signature: _____

Printed Name: Sarah Murphy

Capacity/Title: Owner & Designer

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
11/10/2011 05:00
CK: 1842 CT: 150810 BH: 1297575
1 @ 25.00 = 25.00 ASSUM NAME # 2

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