

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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

2013 MAR 22 AM 9: 38

The assumed business name which the business is:	e undersigned use(s) in the transaction of
Tivera Designs	
The true name(s) and <u>business</u> address business under the assumed business <u>Name</u> Gretchen Sarrazolla	Ss(es) of the entity or individual(s) doing name: Complete Address 4169 N. Desertbreeze Pl, Meridian, ID 83646
11	
☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Es	Submit Certificate of
The name and address to which future correspondence should be addressed: 4169 N. Desertbreeze PI Meridian, ID 83646	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
 Name and address for this acknowledg copy is (if other than # 4 above): 4169 N. Desertbreeze PI Meridian, ID 83646 	ment
Signature:	Secretary of State use only
Printed Name: Gretchen Sarrazolla	
Capacity/Title:Sole Proprietor	
Signature: Printed Name:	IDAHO SECRETARY OF STATE US/22/2013 05:00
	CK: 1225 CT: 156010 BH: 1366054 1 0 25.00 = 25.00 ASSUM MAME 0 2
Capacity/Title·	

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