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

To the SECRETARY OF STATE, STA Pursuant to Section 53-504, Ida gives notice of adoption of an A	tho Code, the undersigned
The assumed business name which the undersigned use(s) in the transaction of business is:	
Notus Lotus and	Lilies
<ol><li>The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:</li></ol>	
Name Susan K. Nash	Complete Address 18518 Galloway Rd.
Daniel P. Nash	same) ID J 83607
The general type of business transacted un (mark only those that apply)	nder the assumed business name is:
☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	g
4. The name and address to which future Phone number (optional): 28-459-4431 correspondence should be addressed:	
Notus Lotus & Lilies 18518 Galloway Rd	Submit Certificate of Assumed Business Name and <b>\$20.00</b> fee to:
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only
Signature: Lucan K. Nash	IDAHO SECRETARY OF STATE  98/28/2000 09:00  CK: 5959 CT: 135306 BH: 344421
Printed Name: Susan K Nash	
Capacity: Se Proprietor	98 1 0 28.96 = 29.80 ASSUM MANE # 2

(see instruction # 8 on back of form)

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