## CERTIFICATE OF ASSUMED BUSINESS NAME (Diseas type or print legibly) To the SECRETARY OF STATE STATE OF IDAHO

Pursuant to Section 53-504, Idaho Coo gives notice of adoption of an Assume	de, the undersigned P-9 AM 9: 08
The assumed business name which the unbusiness is:	
UpHOISTERY BY	Shirley
The true name(s) and business address(e business under the assumed business name	
Shirify A. Bocon	Complete Address 1470 W. Salesyaro Rd Commett, School
3. The general type of business transacted u	under the assumed business name is:
(mark only those that apply)  Retail Trade	ng Transportation and Public Utilities  Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed:  1410 W. Sales yaen Rd	Submit Certificate of Assumed Business Name and \$20.00 fee to:
Emmett, Idaho 836/7  5. Name and address for this acknowledgme	Secretary of State 700 West Jefferson Basement West
COpy is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only  IDANO SECRETARY OF STATE .
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Signature: Shiring A. Bacon

Printed Name: Shiring A. BACON

Capacity: PRASIDENT OWNER - OPELA POR (see instruction # 8 on back of form)

09/09/1999 09:00 CK: 1548 CT: 120282 BH: 246456

1 # 20.00 = 20.00 ASSUM NAME # 2

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