



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO  
Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name.

99 JAN 20 AM 9:59  
SECRETARY OF STATE  
STATE OF IDAHO

FILED

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

Balloons + Beers

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

<u>Name</u>	<u>Complete Address</u>
<u>Carrie L. Tabaja</u>	<u>1553 N. Milwaukee St.</u>
	<u>Boise ID 83704</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

- |                                                  |                                        |                                                              |
|--------------------------------------------------|----------------------------------------|--------------------------------------------------------------|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade         | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services                | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

4. The name and address to which future correspondence should be addressed: Phone number (optional): 352-4438

Same as 2

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

Same

Signature: Carrie L. Tabaja

Printed Name: CARRIE TABAJA

Capacity: Owner

(see instruction # 8 on back of form)

Secretary of State use only  
IDaho SECRETARY OF STATE

01/20/1999 09:00  
CX: 4040 CT: 109605 IN: 100293

1 @ 20.00 = 20.00 ASSUM NAME 1 2

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Revision 1/98  
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