

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

The assumed business name which the undersigned use(s) in the transaction of business is:	
Sherry's Country loss Mart	
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address	
Sherry D Kinman Po B	01 62
Tota	FCN TD 82822
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 	Submit Certificate of Assumed Business Name and \$20.00 fee to:
4. The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
PO BOX 62 Fortatain 100 23855	Boise ID 83720-0080 208 334-2301
Name and address for this acknowledgment	Phone number (optional):
COPY iS (if other than # 4 above):	208-875-0138
- Same	Secretary of State use only
Signature: Sherry Kinman Printed Name: Shorry Kinman Capacity: Dwn on	
Printed Name: Showy B Kinman Showy B K	IDAHO SECRETARY OF STATE 10/24/2002 05:20 CK: 1138 CT: 158010 BH: 642379

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