



# CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2004 APR -9 AM 8:34

THE SECRETARY OF STATE  
STATE OF IDAHOPlease type or print legibly.NOTE: See instructions on reverse before filing.

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

Amisty lane Insurance

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

Name

Marisa Lane

Complete Address

1609 N. Parkcentre Place  
Nampa ID 83651

3. The general type of business transacted under the assumed business name is:

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

4. The name and address to which future correspondence should be addressed:

Marisa Lane  
1609 N. Parkcentre Place  
Nampa ID 83651

Submit Certificate of  
Assumed Business  
Name and **\$25.00** 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):

Marisa Lane  
4203 S Happy Valley Rd  
Nampa ID 83686

Phone number (optional):

(208) 283-5862

Signature: Marisa Lane  
(signature required)

Printed Name: Marisa Lane

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

04/09/2004 05:00  
CK: 10020 CT: 158810 BH: 738382  
1 @ 25.00 = 25.00 ASSUM NAME # 2  
IDaho SECRETARY OF STATE

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