

Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 2012 JUN 29 AM 8: 43

Please type or print legibly. Instructions are included on back of application.

SECHLIAN OF STATE
STATE OF IDAHO

	()
The assumed business name which business is:	n the undersigned use(s) in the transaction of
Elegant Occas	sions by Ten
CITYING CECAG	2000 04 301
	Iress(es) of the entity or individual(s) doing
business under the assumed busine Name	ess name: <u>Complete Address</u>
lensife a Park	P.O. Box 190553
CENTARA 75. KOG	Baise 10 83719
	acted under the assumed business name is:
	portation and Public Utilities
Wholesale Trade ☐ ConstServices ☐ Agriculation	ruction
☐ Manufacturing ☐ Mining	Submit Certificate of
Finance, Insurance, and Real	Assumed Business
4. The name and address to which fut	
correspondence should be address	Secretary of State
Jennifer Roy	PO Box 83720
P.O. Box 190553	Boise ID 83720-0080 208 334-2301
Boise 10 83719	250 504 2501
5. Name and address for this acknowle	edgment
COPY is (if other than # 4 above):	
	
	Secretary of State use only
gnature: Jennile Roy	
// ():1) (b	
rinted Name: <u>Jensi Fér Kuy</u> apacity/Title: <u>Owner</u>	
gnature:	TRAILO PERDETARN OF STATE
rinted Name:	IDANO SECRETARY OF STATE 96/29/2012 05:00 CK: 3878 CT: 158818 BH: 1338273
	1 9 25 00 = 25 00 Accim Unit 4 2

abn.pmd Rev. 07/2010

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