

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

FL. CRECTUE

2003 JUN 23 AM 9: 27

Please type or print legibly. NOTE: See instructions on reverse before filing

STATE STATE

g.	STATE OF IDAHO
<ol> <li>The assumed business name which the undersigned business is:</li> </ol>	use(s) in the transaction of
WET SET by Alisa	Sico M.
•	ntity or individual(s) doing  Complete Address  SE D. Riverbard La.
3. The general type of business transacted under the a	ssumed business name is:
<ul> <li>Wholesale Trade ☐ Construction</li> <li>☐ Services ☐ Agriculture</li> <li>☐ Manufacturing ☐ Mining</li> <li>☐ Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed:  5858 D. Rivarberd Ln. Boine, Do 83703-6249	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol> <li>Name and address for this acknowledgment copy is (if other than # 4 above):</li> </ol>	Phone number (optional):
	Secretary of State use only
Signature: (signature required)	046570
Signature: (signature required)  Printed Name: ALSA M. DRISCOLL  Capacity/Title: OSNES  (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE <b>96/23/2003 05:00</b> CK: 2366 CT: 158010 BH: 687306 1 0 25.00 = 25.00 ASSUM NAME N