



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.

FILED PROTECTIVE

2003 FEB 14 AM 8:38

SECRETARY OF STATE
STATE OF IDAHO

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

Dazzling Digits

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

Name

Complete Address

Sherry A. Ritchie

730 Grant Avenue, Twin Falls, ID 83301

John S. Ritchie

730 Grant Avenue, Twin Falls, ID 83301

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" 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 type="checkbox"/> Finance, Insurance, and Real Estate | |

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

Sherry A. Ritchie
730 Grant Avenue
Twin Falls, ID 83301

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):

Sherry A. Ritchie
730 Grant Avenue
Twin Falls, ID 83301

Phone number (optional):

208-733-6279

Signature: _____

(signature required)

Printed Name: Sherry A. Ritchie

Capacity/Title: Owner

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 09/2002

IDAHO SECRETARY OF STATE
02/14/2003 05:00
CK: 3850 CT: 100093 BH: 662951
1 @ 20.00 = 20.00 ASSUM NAME # 3

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