

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)



To the SECRETARY OF STATE, STATE OF IDAHO  
 Pursuant to Section 53-504, Idaho Code, the undersigned  
 gives notice of adoption of an Assumed Business Name  
 STATE OF IDAHO

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

Agrapha Designs

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

Name

Complete Address

Harless McMillle

9355 Lyle St. Boise, Idaho 83709-4844

3. The general type of business transacted under the assumed business name is:  
 (mark only those that apply)

☒ Retail Trade

☒ Manufacturing

☐ Transportation and Public Utilities

☒ Wholesale Trade

☐ Agriculture

☐ Finance, Insurance, and Real Estate

☐ Services

☐ Construction

☐ Mining

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

Phone number (optional): 362-7143

5. Name and address for this acknowledgment copy is (if other than # 4 above):

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

Signature: Harless McMillle

Printed Name: Harless McMillle

Capacity: Sole Proprietor

(see instruction # 8 on back of form)

Secretary of State use only  
 IDAHO SECRETARY OF STATE

89/23/1997 09:00  
 CK: 4555 CT: 87556 IN: 48720

1 2 20.00 = 20.00 ASSUM NAME

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Revision 2/87

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