

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

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

2007 JAN -4 1 8: 25

SECRETARY OF STATE

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

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| 2.  | The true name(s) and business address(es) business under the assumed business name Name  Matthew Beckett | :   | entity or individual(s) doing  Complete Address 2 W. Idaho Ave., Meridian, ID 83642  |
| 3.  | The general type of business transacted und  | er the a  | assumed business name is:  |
|     | Retail Trade   |   | 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  Phone number (optional): |
| gna | ture: (signature required)   | formskabn.p65<br>/2003                            | Secretary of State use only  |
|     | d Name: Matthew Beckett  city/Title: Owner  (see instruction # 8 on back of form)                        | g:\corptiomstebn formstebn.p65<br>Revised 04/2003 | IDAHO SECRETARY OF STATE  01/04/2007 05:00  CK: 2259 CT: 158010 DH: 102373: 1 2 25.00 = 25.00 ASSUM MANE   |

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