



# 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.

08 JUN 25 AM 8:42

SECRETARY OF STATE  
STATE OF IDAHO

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

REBATES 4 U

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

Name

JUDITH BARTON

Complete Address

P.O. BOX 635 BLACKFOOT, ID 83221

MARK BARTON

P.O. BOX 635 BLACKFOOT, ID 83221

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

<input type="checkbox"/>	Retail Trade	<input type="checkbox"/>	Transportation and Public Utilities
<input type="checkbox"/>	Wholesale Trade	<input type="checkbox"/>	Construction
<input checked="" 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:

REBATES 4 U

P.O. BOX 635

BLACKFOOT, ID 83221

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

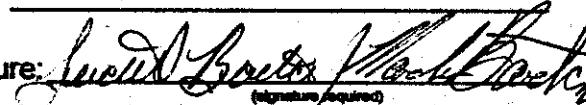
Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

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

Secretary of State use only

Signature:

  
(Signature required)

Printed Name: JUDITH BARTON / MARK BARTON

Capacity/Title: OWNERS

(see instruction # 8 on back of form)

Information Form 500  
Revised 04/2003

IDAHO SECRETARY OF STATE  
06/25/2008 05:00  
CK: 751 CT: 227351 BH: 1121393  
1 e 25.00 = 25.00 ASSUM NAME # 2

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