

Signature

Printed Name:

Capacity/Title: Owner

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

09827-6 23 8:41

submits for filing a certificate of Assumed Business Name. Please type or print legibly.

NOTE: See instructions on reverse before filing. 1. The assumed business name which the undersigned use(s) in the transaction of business is: Designs 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name: Complete Address Name 7214 Opaline Rd Melba ID L'sa Metcelf 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Construction Wholesale Trade Agriculture Services Submit Certificate of Assumed Business Manufacturing Mining Name and \$25.00 fee to: Finance, Insurance, and Real Estate idaho Secretary of State 4. The name and address to which future 450 N 4th Street correspondence should be addressed: PO Box 83720 Boise ID 83720-0080 7214 Opaline Rd (208) 334-2301 5. Name and address for this acknowledgment CODY IS (If other than #4 above): Secretary of State use only