



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED/EFFECTIVE**

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.

00 MAY 23 AM 9:55

SECRETARY OF STATE  
STATE OF IDAHO

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

Centre Stage Dance Studio

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
<u>April Jeannette Craig</u>	<u>201 W. Ave. A, Jerome, ID, 83338</u>
<u>Kortnee G'lenn Saccoman</u>	<u>SAME ↑</u>
<u>Ashlee Ann Saccoman</u>	<u>SAME ↑</u>

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

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): 208-324-0491

April Craig  
1285 S. Lincoln, Apt #33  
Jerome, ID 83338

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

SAME

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

Secretary of State use only

Revision 1/00

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IDAHO SECRETARY OF STATE

05/23/2000 09:00  
CK: 1A CT: 131464 BH: 320272

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: April Craig

Printed Name: April Craig

Capacity: Manager

(see instruction # 6 on back of form)