

D 3712

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

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.

SECRETARY OF STATE  
STATE OF IDAHO  
10 36 AM '97



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

Cherished Moments

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>Nila R. Brown</u>	<u>1917 Leisure Ln. Meridian, Idaho 83642</u>
<u>Wendy M. Chambers</u>	<u>1002 W. Walman Dr. Meridian, ID. 83644</u>

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

<input 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:

Nila R. Brown  
1917 Leisure Ln  
Meridian, Idaho 83642

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: Nila R. Brown  
Printed Name: NILA R. BROWN  
Capacity: General Partner

(see instruction # 8 on back of form)

Revision 2/87

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Secretary of State use only

IDAHO SECRETARY OF STATE  
DATE 04/21/1997  
0900 84763 2  
CK #: 1507 CUST# 80174  
ASSUM NAME 18 20.00= 20.00

# : D