



# CERTIFICATE OF ASSUMED BUSINESS NAME

## FILED EFFECTIVE

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.

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SECRETARY OF STATE  
STATE OF IDAHO

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

Tour Les Bois

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

Name

MARY E. Rohlfing

Complete Address

7020 Pet Haven Ln  
Boise, ID 83716

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

- Retail Trade       Transportation and Public Utilities  
 Wholesale Trade       Construction  
 Services       Agriculture  
 Manufacturing       Mining  
 Finance, Insurance, and Real Estate

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

4. The name and address to which future correspondence should be addressed:

Tour Les Bois  
7020 Pet Haven Ln  
Boise, ID 83716

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

Phone number (optional):

387.0131

Signature:

Mary E. Rohlfing  
(signature required)

Printed Name:

Mary E. Rohlfing

Capacity/Title:

OWNER

(see instruction # 8 on back of form)

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Revised 04/2003

12/01/2003 05:00  
 CK: 3993 CT: 158810 BH: 714219  
 1 @ 25.00 = 25.00 ASSUM NAME # 3

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