CERTIFICATE OF ASSUMED BUSINE (Please type or print legibly. See instructions on the SECRETARY OF STATE, STATE OF IDAHO)	ESS I	NA)	ME	=
To the SECRETARY OF STATE, STATE OF IDAHO	Ern	2	1 tr	t a

8	(Please type or print legibly. See i	nstructio	ns on reverse.)	
会の	To the SECRETARY OF STATE, STATE OF Pursuant to Section 53-504, Idaho Of gives notice of adoption of an Assur	Code, the		LED/EFFECTIVE
1.	The assumed business name which the unders	signed us	e(s) in the transaction of	
	business is: By The Books			Ä
	07 110 0000			H
2.	The true name(s) and business address(es) of business under the assumed business name is	s/are:	•	Z
	Jennifer Romagnano 4132		nplete Address CT \$t. ROISE ID 93702	
		1		
3.	The general type of business transacted under (mark only those that apply)	the assu	med business name is:	
	Retail Trade Manufacturing Wholesale Trade Agriculture Services Construction	Fin	insportation and Public Utilities ance, Insurance, and Real Esta ning	
4.	The name and address to which future Phon correspondence should be addressed:	ie numbe	r (optional): (208) 433 - 9043	
	Jinnifer Romagnano		Submit Certificate of	
	4132 Garriet St.		Assumed Business Name and \$20.00 fee to:	
	Boise 10. 83703			Ì
_			Secretary of State 700 West Jefferson	
5.	Name and address for this acknowledgment copy is (if other than # 4 above):		Basement West PO Box 83720	

Signature: <u>January Romagnano</u>
Printed Name: <u>Jennifer Romagnano</u>

(see instruction # 8 on back of form)

Capacity:

Secretary of State use only IDAHO SECRETARY OF STATE

208 334-2301

02/02/2001 09:00 CK: 2128 CT: 141733 BH: 376657

Boise ID 83720-0080

1 0 20.00 = 20.00 ASSUM NAME # 2

-47346