

Capacity/Title: OWNER

Capacity/Title: \_\_\_

Signature:

Printed Name: \_\_\_\_

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Please type or print legibly.

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE

2012 SEP 24 AH 9: 33

## Instructions are included on back of application.

SEGNETARI OF STATE STATE OF IDAHO

The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:  Name  Complete Address  STACEY LENON  3721 BLUEGROUSE POCATELLO, ID 8  The general type of business transacted under the assumed business name i  Retail Trade  Transportation and Public Utilities  Wholesale Trade  Construction  Agriculture  Manufacturing  Mining  Finance, Insurance, and Real Estate  The name and address to which future  Secretary of State
The general type of business transacted under the assumed business name in Retail Trade Transportation and Public Utilities  Wholesale Trade Construction  Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate  3721 BLUEGROUSE POCATELLO, ID 8
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
correspondence should be addressed: 450 North 4th Street
731 PLUE CROUSE Boise ID 83720-0080
208 334-2301
STACEY LENON PO Box 83720  Boise ID 83720-0080

IDAHO SECRETARY OF STATE 09/25/2012 05:00 CK: 535000 CT: 274595 BH: 1341084 1 9 25.60 = 25.00 ASSUM MANE # 2

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