

## CERTIFICATE OF ASSUMED BUSINESS NAME

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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STATE OF IDAHO

Vicki Kunz Enterprises	
The true name(s) and business address(es) business under the assumed business name Name	: Complete Address
Victoria W. Kunz	4824 E. River Walk Avenue, Post Falls, ID 83854
-	
	:
The general type of business transacted und	er the assumed business name is:
	and Public Utilities
<ul><li>Wholesale Trade</li><li>✓ Services</li><li>✓ Manufacturing</li><li>✓ Mining</li></ul>	Submit Certificate of Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future correspondence should be addressed:	Idaho Secretary of State 450 N 4th Street PO Box 83720
Victoria m. Kunz	Boise ID 83720-0080
4824 E. River Walk Avenue	(208) 334-2301
Post Falls, Idaho 83854	
. Name and address for this acknowledgmer copy is (if other than #4 above):	and the second of the second o
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	Secretary of State use only
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ature: Victoria M Bum	72003
ed Name:Victoria M. Kunz	Revised O4/2003
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(see instruction # 8 on back of form)	11/07/2007 0 CK: 2967 CT: 268352 BH:

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