

Capacity/Title:

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.

2013 JUN 27 AM 9: 7

Please type or print legibly.
Instructions are included on back of application.

SECRETARY OF C
1. The assumed business name which the undersigned use(s) in the transaction of []All business is: Marte Cliff Copywriting
2. The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address Marte G. Cliff 1794 Blue hake Rd Priest River, 15 93954
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 Submit Certificate of Assumed Business Finance, Insurance, and Real Estate Name and \$25.00 fee to:
4. The name and address to which future correspondence should be addressed: Marte Cliff 1794 Blux Lake Rd Priest River, ID 83856 Secretary of State 450 North 4th Street PO 80x 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above).
Secretary of State use only
Signature: Signature:
Printed Name: MARTE C. ELIFF
Capacity/Title: <u>OW ner</u> Signature:
Printed Name:

IDAHO SECRETARY OF STATE

06/27/2013 05:00

CK: 1388 CT: 158010 BH: 1379852
1 8 25.00 = 25.00 ASSUM NAME # 2

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