

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

## FILED EFFECTIVE

269 1187 25 All 8: 26

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.

(see instruction # 8 on back of form)

NOIE: See instructions on reverse perore filin	SECRETARY DE RIC
The assumed business name which the undersign business is:	
Hooglady Creati	ions
The true name(s) and business address(es) of the business under the assumed business name:     Name     Lonalee Hoogland	e entity or individual(s) doing  Complete Address  P.O. Box 1926 Sandpoint, Id 83864
3. The general type of business transacted under the Retail Trade Transportation and F Wholesale Trade Construction	
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
The name and address to which future correspondence should be addressed:  Hooglady Creations	Secretary of State 700 West Jefferson Basement West
P.O. Box 1926 Sandpoint Idaho 83864	PO Box 83720 Boise ID 83720-0080 208 334-2301
<ol><li>Name and address for this acknowledgment copy is (if other than #4 above):</li></ol>	Phone number (optional): 208-265-8598
	Secretary of State use only
Signature:	Dilling
Printed Name: Lonalee Hoogland	IDAHO SECRETARY OF STATE 05/25/2007 05:20 CK: 1172 CT: 213742 105:200
Capacity/Title: Owner/President	CK: 1172 CT: 213743 BH: 1855911 1 8 25.00 = 25.00 ASSUM NAME #