



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned use(s) in the transaction of business is:

YELLOWSTONE CANDLE COMPANY

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

Name

Complete Address

TERI E. GALLUS

4810 INDUSTRIAL AVE. E., SUITE B

COEUR D'ALENE, ID 83814

HM: 602 E. 17TH AVE.

POST FALLS, ID 83854

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Retail Trade    | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture   | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services                   | <input type="checkbox"/> Construction  | <input type="checkbox"/> Mining                              |

208-664-4566

4. The name and address to which future correspondence should be addressed: Phone number (optional):

4810 INDUSTRIAL AVE. E. SUITE B.

COEUR D'ALENE, ID 83814

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

5. Name and address for this acknowledgment copy is (if other than # 4 above):

602 E. 17TH AVE.

POST FALLS, ID 83854

Signature: Teri E. Gallus

Printed Name: TERI E. GALLUS

Capacity: OWNER, SOLE PROPRIETOR

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

01/10/2000 09:00  
CX: 561 CT: 1249% BH: 200146

1 @ 20.00 = 20.00 ASSUM NAME # 2

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