



# 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.

FILED EFFECTIVE

2006 MAR -8 AM 9:22

SECRETARY OF STATE  
STATE OF IDAHO

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

Calliope Creations

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

Name

Complete Address

Andrea M. Estes

2721 N. Esquire Dr.

2

Boise, Idaho

83704

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  
☐ Finance, Insurance, and Real Estate

4. The name and address to which future correspondence should be addressed:

Andrea M. Estes

2721 N. Esquire

Boise, Idaho 83704

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

n/a

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

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

note:

Phone number (optional):

(208) 484-7147 *please don't list for public records*

Secretary of State use only

Signature: Andrea M. Estes

(signature required)

Printed Name: Andrea M. Estes

Capacity/Title: owner

(see instruction # 8 on back of form)

g:\corpforms\abn form\abn.pdf  
Revised 04/2003

097288  
IDAHO SECRETARY OF STATE  
03/08/2006 05:00  
CK: 1620 CT: 158010 BH: 941060  
1 @ 25.00 = 25.00 ASSUM NAME # 2