



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:

Knits With a Flare by Sabra

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
<u>Sabra Coalman</u>	<u>1711 Redbird Rd</u>
<u></u>	<u>Lewiston Id 83501</u>
<u></u>	<u></u>

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 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

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

Sabra Coalman
1711 Redbird Rd.
Lewiston Id. 83501

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

Signature: Sabra Coalman

Printed Name: Sabra Coalman

Capacity: Sole Proprietor

(see instruction # 8 on back of form)

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

Secretary of State use only

IDAHO SECRETARY OF STATE

10/12/2000 09:00
CK: 3720 CT: 130532 DN: 354076

1 @ 20.00 = 20.00 ASSUM NAME # 2

D. 39430

Revision 12/99

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FILED/EFFECTIVE

NOT OCT 12 AM 10:15
SECRETARY OF STATE
STATE OF IDAHO