

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.

Designs of the Heart	
. The true name(s) and business address(es) of	the entity or individual(s) doing
business under the assumed business name:	Complete Address
Name Rolaine Winkle	Complete Address 10400 W. Overland Rd Ste. #203
RUIAINE WINKIE	
	Boise, ID 83709
The general type of business transacted under	the assumed business name is:
Retail Trade Transportation and	d Public Utilities
☐ Wholesale Trade ☐ Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
The name and address to which future	Secretary of State
correspondence should be addressed:	700 West Jefferson
•	Basement West
Rolaine Winkle	PO Box 83720 Boise ID 83720-0080
11085 W. Bridgetower Dr	208 334-2301
Boise, ID 83709	
5. Name and address for this acknowledgment	Phone number (optional):
COPY is (if other than #4 above):	
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	Secretary of State use only
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ted Name: Rolaine Winkle	IDAHO SECRETARY OF STATE 94/20/2094 95:0
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