

2006 JAN -9 AM 10: 16



CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction # 8 on back of form)

Lessons ir	n Dance
2. The true name(s) and business address(es) business under the assumed business name Name Jennifer Dorman	of the entity or individual(s) doing e: Complete Address 4252 N. Cambria Ln. Boise, Idaho 83703
3. The general type of business transacted und	
Retail Trade	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
5. Name and address for this acknowledgment copy is (if other than # 4 above).	Phone number (optional): 208-860-2132
	Secretary of State use only
gnature: <u>Jennifu Doman</u> (signature required) rinted Name: <u>Jennifer Dorman</u> apacity/Title: <u>Sile Proprietor</u>	IDAHO SECRETARY OF STATE O1/09/2006 05:0 CK: 5052 CT: 158010 BH: 9307 1 P 25.00 = 25.00 ASSUM NAME

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