

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)



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.

FILED/EFFECTIVE  
00 AUG 25 PM 9:06  
STATE OF IDAHO

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

Classic Collections

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

<u>Name</u>	<u>Complete Address</u>
<u>Kimberly A Collins</u>	<u>297 W 116<sup>th</sup> St. Idaho Falls Idaho 83402</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 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

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

Kimberly A Collins  
297 W 116<sup>th</sup> St  
Idaho Falls Idaho 83402

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

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

Signature: Kimberly A Collins  
Printed Name: Kimberly A Collins  
Capacity: President

(see instruction # 8 on back of form)

IDAHO SECRETARY OF STATE only

08/25/2000 09:00  
CK: 06-134421674 CT: 135215 BH: 343992

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 38448

Revision 2/97

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