

FILED EFFECTIVE



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

08 FEB -7 AM 8:24

SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Sweet Dreams Quilting Company

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

Julie A. Larson16558 Maravilla Pl. Caldwell, IdDalegene O. Larson" "

83407

Carrie B. Hull95 Tamarack Lane Sagle, IdRevis Hull" Same "

83860

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:

Julie A. Larson16558 Maravilla Pl.Caldwell, Id 83407

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: Julie A. Larson

(signature required)

Printed Name: Julie A. LarsonCapacity/Title: owner

(see instruction # 8 on back of form)

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

Idaho Secretary of State  
450 N 4th Street  
PO Box 83720  
Boise ID 83720-0080

(208) 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

02/07/2008 05:00

CK: 1276 CT: 222319 BH: 1898444

1 @ 25.00 = 25.00 ASSUM NAME # 2

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