

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED/EFFECTIVE

Jul 30 10 30 MM .01

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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	STATE OF LOAHO
The assumed business name which the unduliness is:	
Classic Framing and &	+ RT
The true name(s) and <u>business</u> address(es) business under the assumed business name	:
<u>Name</u>	Complete Address
Sherrie WURTZ &	2571 W. WILLARD ST
	meridian Jd 83642
3. The general type of business transacted un  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Sherrie Worzz  251 W. WICLARD ST.  Meridian J. 83642	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
5. Name and address for this acknowledgme	nt Phone number (optional):
COPY IS (if other than # 4 above):	
	<del></del>
	Secretary of State use only
Printed Name: Sherrie Wuftz Capacity: Owner (see instruction #8 on back of form)	IDAHO SECRETARY OF STATE  100000000000000000000000000000000000
(See instruction # 5 on pack of form)	- 1/0.01

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