CERTIFICATE OF ASSUMED BUSINES NAME CTIVE (Please type or print legibly. See instructions on reverse.)

(see instruction # 8 on back of form)

To the SECRETARY OF STATE, STATE OF IDAHO 00 MAY -8 AM 9: 40 Pursuant to Section 53-504, Idaho Code, the undersigned

	gives notice of adoption of an Assumed Business Name. STATE OF IDAHO		
1.	The assumed business name which the undersigned us business is:	se(s) in the transaction of	
2.	The true name(s) and business address(es) of the entit business under the assumed business name is/are: Name Co	y or individual(s) doing	
	Elisa Radford 1217 Broadway AVE#108 Boise ID 83704		
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)		
	Retail Trade		
4.	4. The name and address to which future Phone number (optional): correspondence should be addressed:		
	1217 Brondway AR #108	Submit Certificate of Assumed Business Name and \$20.00 fee to:	
5.	Name and address for this acknowledgment copy is (if other than #4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301	
	1299	Secretary of State use only IDANU SECKETARY OF STATE	
Signat	ure: Shoa Radjoid	US: none CT: 126357 BH: 315813	
-	FISA BONFORM	1 e cu.u0 = 20.00 ASSUM NAME # 2	
Capac	city:	D 35595	