

## CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

**FILED/EFFECTIVE**

03/13/20



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.

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

A Passion For Flowers

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

Name Denise Y. Edmonds Complete Address 1535 E Octavia Ct Post Falls, ID 83854

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 type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

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

Denise Y. Edmonds  
1535 E. Octavia Ct.  
Post Falls, ID 83854

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

Secretary of State use only

IDAHO SECRETARY OF STATE

03/20/2000 09:00  
CX: 3721 CT: 120486 BH: 300751

1 @ 20.00 = 20.00 ASSUM NAME # 2

Signature: Denise EdmondsPrinted Name: Denise EdmondsCapacity: owner

(see instruction # 8 on back of form)

D 34200