

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

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SECHIBERY OF STATE

Please type or print legibly.

Instructions are included on back of application.

1.	The assumed business name which the undersigned use(s) in the transaction of business is:	
	SIGN	itl
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name: Name Complete Address	
:	Tonya Bunnell 74	87 Bowman Lane, Idaho Falls, ID 83406
3.	The general type of business transacted under	er the assumed business name is:
	✓ Retail Trade ☐ Transportation and Transportation ✓ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ✓ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$25.00 fee to:
4.	The name and address to which future correspondence should be addressed: SIGN iT! 7487 Bowman Lane Idaho Falls, ID 83406	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5.	Name and address for this acknowledgment copy is (if other than # 4 above):	·
Signa	ature: Mulbushell	Secretary of State use only
	ed Name: Tonya Bunnell	
Capacity/Title: Owner		IDAHO SECRETARY OF STATE
•	ture:	07/21/2011 05:00 CK: 1286 CT: 143288 BH: 1283339 1 @ 25.08 = 25.00 ASSUM WANE #
	ed Name:	1 @ 25.00 = 25.00 ASSUM WANE N
∪apa	city/Title:	\sim

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