

Capacity/Title: Co-Owner

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

2012 JUL 30 AM 9: 12

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

	Imagine That!
The true name(s) and <u>business</u> add business under the assumed busines <u>Name</u> Dianna L. Brown Gary C. Brown	ress(es) of the entity or individual(s) doing ess name: Complete Address 20540 Academy Rd. Greenleaf, ID 83626 20540 Academy Rd. Greenleaf, ID 83626
 ✓ Retail Trade ☐ Transp ☐ Wholesale Trade ☐ Constr ✓ Services ☐ Agricu ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real 4. The name and address to which fut correspondence should be address 	Submit Certificate of Assumed Business Estate Name and \$25.00 fee to: ure Secretary of State ed: 450 North 4th Street
Gary C. and Dianna L. Brown P.O. Box 153 Greenleaf, ID 83626 5. Name and address for this acknowle COPy is (if other than # 4 above):	PO Box 83720 Boise ID 83720-0080 208 334-2301 edgment
	Secretary of State use only
ignature: Dianna L. Brown apacity/Title: Co-Owner ignature: Dianna L. Brown	IDAHO SECRETARY OF STATE ### ### ### ### ####################

D157162