

CERTIFICATE OF ASSUMED BUSINESS NAME

11 MAR 16 AM 8:31

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

SECRE ARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the ur	ndersigned use(s) in the transaction of
business is: Katie's Uphals	tery Shop
The true name(s) and business address(e business under the assumed business nar	es) of the entity or individual(s) doing
Name	Complete Address
Katie Frazier	3416 12th St C
	Lawiston ID 83501
2 The general true of housing to the second of	
3. The general type of business transacted u	under the assumed business name is:
Retail Trade Transportation Wholesale Trade Construction	on and Public Utilities
Services	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	e Name and \$25.00 fee to:
 The name and address to which future correspondence should be addressed: 	Secretary of State 700 West Jefferson
Katia trazier	Basement West PO Box 83720
3416 1249 St C	Boise ID 83720-0080
Lewiston ID 83501	208 334-2301
Name and address for this acknowledgm copy is (ff other than # 4 above):	nent Phone number (optional):
·	
	Secretary of State use only
	- 8
Signature: Later Linear	TRAIN CEOCETADY RE CTATE
Signature equival)	1DAHO SECRETARY OF STATE 03/16/2011 05:00
Printed Name: Katie Frazier	19440 SECKETHRY OF STREE 19440 SECKETHRY OF STREE 19540 SECKETHRY OF
Capacity/Title: Owner	IDAHO SECRETARY OF STATE 93/16/2011 05:00 CK: 188495231 CT: 158918 BH: 1264477 1 9 25.08 = 25.08 ASSUM NAME 8 2
(see instruction # 8 on back of form)	140140