

227



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**Please type or print legibly.**

**NOTE: See instructions on reverse before filing.**

## FILED/EFFECTIVE

02 JUL 19 AM 10:24

SECRETARY OF STATE  
STATE OF IDAHO

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

Furniture Solutions

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

Name

Tim Roberts

Complete Address

265 W. OVERLAND

Meridian ID

83642

3. The general type of business transacted under the assumed business name is:

- ☒ Retail Trade      ☐ Transportation and Public Utilities  
☐ Wholesale Trade      ☐ Construction  
☐ Services      ☐ Agriculture  
☐ Manufacturing      ☐ Mining  
☐ Finance, Insurance, and Real Estate

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

265 W. Overland

MERIDIAN ID 83642

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

Phone number (optional):

(208) 895-0235

Secretary of State use only

Signature: Tim Roberts

(signature required)

Printed Name: TIM Roberts

Capacity/Title: OWNER

(see instruction # 8 on back of form)

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Revised 12/2001

IDAHO SECRETARY OF STATE  
07/19/2002 05:00  
CK: 1284 CT: 162035 BH: 477976  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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