



# 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

2006 MAY -4 PM 12:33

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

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

Barefoot Beaded Elegance

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

Name

Complete Address

Dale Hetherington

P.O. Box 1003 Cascade, ID 83611

Krisie Hetherington

P.O. Box 1003 Cascade, ID 83611

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

Submit Certificate of  
Assumed Business  
Name and \$25.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

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

Dale Hetherington

P.O. Box 1003

Cascade, ID 83611

5. Name and address for this acknowledgment copy is (if other than # 4 above):

Phone number (optional):

208-939-6757

Secretary of State use only

Signature:

*Dale Hetherington*  
(signature required)

Printed Name:

Dale Hetherington

Capacity/Title:

Owner

(see instruction # 8 on back of form)

g:\corp\forms\abn\_form\abn.p65  
Revised 04/2003

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IDAHO SECRETARY OF STATE  
05/04/2006 05:00  
CK: 5925 CT: 199944 BH: 952963  
1 @ 25.00 = 25.00 ASSUM NAME # 2