

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned

FILED EFFECTIVE

2004 FEB -4 PM 2: 08

submits for filing a certificate of Assumed Business Name. Please type or print legibly. NOTE: See instructions on reverse before filing.

OWNER

(see instruction # 8 on back of form)

Capacity/Title:

SAME OF IDAHO

| The assumed business name which the undersigned business is:      Massack by Shannon   | ed use(s) in the transaction of  |
|--|--|
| 2. The true name(s) and business address(es) of the business under the assumed business name:  Name  Shannon Quick   | entity or individual(s) doing  Complete Address  1045 (hisholm (t Post Falls, ID 83854   |
| 3. The general type of business transacted under the   | assumed business name is:  |
| Retail Trade   | 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  Phone number (optional): |
| COpy is (if other than # 4 above):   | (20x) 641-9163   |
| Same   | Secretary of State use only  |
| ignature: Shannon L. Quick  see the state of | IDAHO SECRETARY OF STAT  |

02/04/2004 05:00 CK: 1248 CT: 158810 BH: 725524 1 8 25.00 = 25.00 ASSUM NAME # 2

IDAHO SECRETARY OF STATE

D72789