## FILED/ERE

<b>CERTIFICATE OF ASSU</b>	JMED BUSINESS NAME
(Please type or print legibly	See instructions on reverse VV

	(Flease type of print legibly. 3	ee manucho	ils on reverse.) %	
	To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idah gives notice of adoption of an As	no Code, the	undersigned 150 Sp	
1.	The assumed business name which the und business is:	dersigned us	e(s) in the transaction of	
	RAINING SUN			
2.	. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:			
	Name Rick P. Giles 2	Complete Address 2582 E. Hudlow Rd. Hayden, ID 83835		
	BARBARA GILES 25	582 E. Huc	llow Rd. HAYden ID. 83835	
		***************************************		
3.	The general type of business transacted un (mark only those that apply)	der the assu	med business name is:	
	☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	☐ Fin ☐ Mir	ansportation and Public Utilities ance, Insurance, and Real Estate hing	
4.	The name and address to which future correspondence should be addressed:	hone numbei	(optional): (208) 762-9074	
	RAINING SUN		Submit Certificate of	
	2582 E. HUDLOW Rd.		Assumed Business Name and <b>\$20.00</b> fee to:	
	HAYDEN, ID. 83835		Secretary of State 700 West Jefferson	
5.	Name and address for this acknowledgmen copy is (if other than # 4 above):	t	Basement West	
			PO Box 83720 Boise ID 83720-0080 208 334-2301	
	W · · · ·		Secretary of State use only	
	ire: Think of Gles	Revision 1788	IDAHO SECRETARY OF STATE <b>08/06/2001 05:00</b> CK: NO CK:# CT: 149704 BH: 411937	
	Name: Rick P. Giles	malabn.p65	1 8 20.00 = 20.00 ASSUM NAME # 2	
Jaci	ty: OWNER	Ē	11021-1	

Sig

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(see instruction # 8 on back of form)

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