

FILED EFFECTIVE



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.

2004 APR 14 AM 8:47
STATE OF IDAHO

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

The Jingle Bob

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
<u>Delores Allie</u>	<u>The Jingle Bob</u>
<u>Katherine Allie</u>	<u>1375 Hy. 6 west</u>
	<u>Potlatch, Id. 83855</u>

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> 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:

Delores Allie
Box 13
Harvard, Id. 83834

Phone number (optional):

208-875-1627

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

Signature: Delores a. allie
(signature required)

Printed Name: Delores Allie

Capacity/Title: owner

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 04/2003

IDAHO SECRETARY OF STATE
04/14/2004 05:00
CK: 91776424691 CT: 158010 BH: 739157
1 @ 25.00 = 25.00 ASSUM NAME # 2

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