

## 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.



2006 JUL -3 AM 10: 18 SECRETARY OF STATE STATE OF IDAMO

business is:  All Things Remembered	
The true name(s) and business address(e business under the assumed business name     Name     Donna Lynn Francis	
3. The general type of business transacted u	
✓ Retail Trade ☐ Transportation ☐ Wholesale Trade ☐ Construction ☐ Services ☐ Agriculture ☐ Manufacturing ☐ Mining ☐ Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Donna L Francis ☐ 19984 East Fountain Drive Post Falls Idaho 83854	Submit Certificate of Assumed Business
5. Name and address for this acknowledgm copy is (# other than # 4 above):	Phone number (optional):  509-599-1052
	Secretary of State use only
ignature: Norma Hames  (signature required)  rinted Name: Donna L Francis	SECRETARY OF STATE
apacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE  ### ### ### ### ####################

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