



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.

Instructions are included on back of application.

FILED EFFECTIVE

2014 DEC -4 AM 9:13

SECRETARY OF STATE
STATE OF IDAHO

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

Crossroads Academy of Music

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

DeAnna Connelly

400 S. Main Payette, ID 83661

Bill Connelly

400 S. Main Payette, ID 83661

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 checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

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

DeAnna and Bill Connelly

1160 1st Ave. S

Payette, ID 83661

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

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

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

Signature: DeAnna Connelly

Printed Name: DeAnna Connelly

Capacity/Title: Owner

Signature: [Signature]

Printed Name: Bill Connelly

Capacity/Title: Owner

IDAHO SECRETARY OF STATE

12/04/2014 05:00

CK:1619 CT:303778 BH:1451601

1@ 25.00 = 25.00 ASSUM NAME #2

D175307