



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned PRAPHAISRI THONGDA gives notice of adoption of an Assumed Business Name

98 DEC 22 AM 9:05
3 25 PM '98
SECRETARY OF STATE
STATE OF IDAHO

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

PHAISEE'S GIFT SHOP

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

Complete Address

PRAPHAISRI THONGDA

195 NORTH 2nd WEST

TOWNE SQUARE MALL

Min. HOME, ID 83647

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Finance, Insurance, and Real Estate |
| <input type="checkbox"/> Services | <input type="checkbox"/> Construction | <input type="checkbox"/> Mining |

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

Phone number (optional): (208) 322-5385

Praphaisri Thongda

1019 1/2 W. FLORENCE CT

BOISE ID 83704

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

PRAPHAISRI THONGDA

1019 1/2 W. FLORENCE CT

BOISE ID 83704

Signature: Pr. Thongda

Printed Name: PRAPHAISRI THONGDA

Capacity: owner

(see instruction # 8 on back of form)

Submit Certificate of Assumed Business Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only
IDAHO SECRETARY OF STATE

12/22/1998 09:00
--CK: 378 CT: 188832 DH: 172448

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revision 1/98
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