



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-594, Idaho Code, \_\_\_\_\_  
submits for filing a certificate of assumed Business Name:

Secretary of State  
Business Entities  
<http://www.idsos.state.id.us/>

**FILED EFFECTIVE**

Please type or print legibly.

NOTE: See instructions on reverse before filing.

2004 SEP 16 AM 9:40

SECRETARY  
STATE OF IDAHO

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

finishing touches

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>Tracy Ackerman</u>	<u>3013 Lake Forest Hayden LK, ID</u>
	<u>83835</u>

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

- |  |  |
|--|--|
| <input 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

Tracy Ackerman  
3013 Lake Forest Dr  
Hayden Lake, ID 83835

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

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

Phone number (optional):

208-772-9455

Signature: \_\_\_\_\_

Tracy Ackerman  
(signature required)

Printed Name: \_\_\_\_\_

Tracy Ackerman

Capacity/Title: \_\_\_\_\_

Owner

(see instruction # 8 on back of form)

Secretary of State use only

5. Incorporation forms taken p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
09/16/2004 05:00  
CK: 1010 CT: 150010 BH: 766290  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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