



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.

09 JUL 27 AM 8:43

SECRETARY OF STATE
STATE OF IDAHO

PLEASEREFLECTIVE

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

gems

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>Maria Stellflug</u>	<u>604 S Osprey Dr</u>
	<u>Post Falls, ID</u>
	<u>83854</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:

*Maria Stellflug
604 S Osprey Dr
Post Falls ID 83854*

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

Idaho Secretary of State
450 N 4th Street
PO Box 83720
Boise ID 83720-0080

(208) 334-2301

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

Signature: *Maria Stellflug*
(signature required)

Printed Name: *Maria Stellflug*

Capacity/Title: *owner*

(see instruction # 8 on back of form)

Signature/Print form 500
Revised 04/2003

Secretary of State use only

IDaho SECRETARY OF STATE
07/27/2009 05:00
CH: 1211 CT: 158818 BH: 1188437
1 e 25.00 = 25.00 ASSUM NAME # 2

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