



**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.

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

Doug BASKILL Photography

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

Doug Gaskill

Charmaine Baskill

~~3155 E 3200 N Twin Falls ID 83301~~

3392 E 3788 10 Kimbark M 83341

3155 E 3200 N TWIN FALLS ID

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:

Same As Above

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

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

Phone number (optional):

208 733 85 14

Secretary of State use only

Signature: x Charmaine Laskill

Printed Name: Charmaine Gaskill

Capacity: Owner

(see instruction #8 on back of form)

IDaho SECRETARY OF STATE
01/07/2002 05:00
CK: 763 CT: 155348 BH: 438283
1 P 28.00 = 28.00 ASSUM NAME # 2

D 50892