<u> </u>			
	CERTIFICATE OF		FILED EFFECTIVE
	ASSUMED BUSINESS	S NAME	
	Pursuant to Section 53-504, Idaho Code, th submits for filing a certificate of Assumed E	· · · · · · · · · · · · · · · · · · ·	15 ELU - 0 121 0: 00
Please type or print legibly.			STOLLAR OF OF E
	structions are included on back of app	plication.	
 The assumed business name which the undersigned use(s) in the transaction of business is: 			
Inspired Furniture & Finishes			
The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:			
Name		Complete Address	
Megan Eallocik		945 E. Mullan Ave Post Falls, ID 83854	
2 The	annound turns of huminance transported up	der the seco	nod husinose namo ie:
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction			
	Manufacturing Mining	5	Submit Certificate of
	Finance, Insurance, and Real Estate		ssumed Business
			lame and \$25.00 fee to:
	name and address to which future		Secretary of State
	espondence should be addressed: an Eatock		150 North 4th Street PO Box 83720
	E. Mullan Ave Post Fails, ID 83854		Boise #D 83720-0060
9431	L. MUNICITA WE FUSI FAILS, IJ 63654	2	08 334-2301
5. Name and address for this acknowledgment copy is (frother than #4 above):			
	in Cirk		Security of State use only
Signature:	-Migon Estante		
Printed Name: Megan Eatock			
Capacity/T			
Signature:			
Printed Name:			IDAHO SECRETARY OF STATE 02/09/2012 05:00
Capacity/T	ite:		CK: 1016 CT: 266828 BH: 1309932 1 9 25.00 = 25.00 Assum NAME # 2
	abiupmd Plex.07	720110	
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