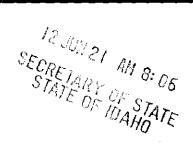


## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

## Please type or print legibly. Instructions are included on back of application.



1.	The assumed business name which the uno business is:	
	E-R Pno	notography
2.	The true name(s) and <u>business</u> address(es business under the assumed business nam <u>Name</u> Elysia-Rose N.K. Nary	
3.	The general type of business transacted un	nder the assumed business name is:
	<ul> <li>□ Retail Trade</li> <li>□ Wholesale Trade</li> <li>□ Construction</li> <li>☑ Services</li> <li>□ Agriculture</li> <li>□ Manufacturing</li> <li>□ Mining</li> <li>□ Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business
4.	The name and address to which future correspondence should be addressed:  Elysia-Rose Nary  2140 N. Todd Way  Meridian, ID 83646	Secretary of State 450 North 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):	ent
Signa	ture: 20847000	Secretary of State use only
_	d Name: Elysia-Rose N.K. Nary	
	city/Title: Owner	
Signature:		IDAHO SECRETARY OF STATE  06/21/2012 05:00  CK: 14450 CT: 271642 BH: 1329177
	ed Name:	1 8 25.80 = 25.88 ASSUM NAME # 2
Capa	city/Title:	D156409
	abn.pmd Rev. 07/2	72010 VIJQ701