

Capacity/Title:

Owner

(see instruction #8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

2035 SEP 12 MI 10: 83

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: Celebrate! Party Planning 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 Alyssa Chevaun Townsend 12377 W.La Grange St. Boise, ID. 83709 3. The general type of business transacted under the assumed business name is: Transportation and Public Utilities Retail Trade Wholesale Trade Construction Services Agriculture Submit Certificate of Manufacturing Mining **Assumed Business** Name and \$25.00 fee to: Finance, Insurance, and Real Estate 4. The name and address to which future Secretary of State correspondence should be addressed: 700 West Jefferson **Basement West** Alyssa Townsend PO Box 83720 12377 W. La Grange St. Boise ID 83720-0080 208 334-2301 Boise, ID, 83709 5. Name and address for this acknowledgment Phone number (optional): CODY IS (if other than #4 above). (208) 562-0235 Secretary of State use only Signature: Printed Name: Alyssa C. Townsend

IDAHO SECRETARY OF STATE
09/12/2005 05:00
CK: 1809 CT: 158010 BH: 910954
1 0 25.00 = 25.00 ASSUM NAME #