

## **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. 2004 OCT -4 AM 9: 35

Please type or print legibly. NOTE: See instructions on reverse before filing. STATE OF DAHO

<ol> <li>The assumed business name which the undersigned use(s) in the transaction of business is:</li> <li>Memorabilia Frames ξ Things</li> </ol>	
2. The true name(s) and business address(es) or business under the assumed business name:  Name  Shelley Watson  A	f the entity or individual(s) doing  Complete Address  424 Sagittarius Dr.  Dunga, 10 83651
3. The general type of business transacted under the assumed business name is:    X   Retail Trade	
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Shelly Watson	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
2424 Sagi Harrus Dr. Nampa, 10 83651  5. Name and address for this acknowledgment	208 334-2301  Phone number (optional):
COPY IS (if other than # 4 above):	2 <u>08-466-55</u> 67  Secretary of State use only
Signature: Signature required) Printed Name: Shelley J Watson	Sevies of Control of C
Capacity/Title: Owner (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE  10/04/2004 05:00  CX: 863 CT: 158016 BH: 769222  1 0 25:00 = 25.00 ASSUM NAME #