



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.

2013 JAN -4 AM 9:09
SECRETARY OF STATE
STATE OF IDAHO

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

Villa Lifestyles

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

Villa Décor and Design, LLC

228 E. Plaza Dr, Ste B, Eagle, ID 83616

(W 72928)

3. The general type of business transacted under the assumed business name is:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Trade Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business

Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

Villa Lifestyles

228 E. Plaza Dr, Ste B
Eagle, ID 83616

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

Signature: *Sandie Maggio*

Printed Name: Sandie Maggio Gibson

Capacity/Title: Owner

Signature: *Sandie Maggio*

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
01/04/2013 05:00
CK: 1479 CT: 224393 BH: 1354248
1 @ 25.00 = 25.00 ASSUM NAME # 2

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