

Capacity/Title:_

(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.

Please type or print legibly.

NOTE: See instructions on reverse before filing.	
The assumed business name which the undersign business is:	
Beyond Belief Arts a	nd Entertainment
The true name(s) and business address(es) of the business under the assumed business name: Name	e entity or individual(s) doing Complete Address
Lynnette Fuson 910	Vista Ave Lowiston 10.83501
3. The general type of business transacted under the Retail Trade Transportation and Pull Wholesale Trade Construction Agriculture Manufacturing Mining Finance, Insurance, and Real Estate 4. The name and address to which future correspondence should be addressed: The fusor Good Story Construction and Pull S	i)
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): (208) 413-4577
	Secretary of State use only
Signature: Paul Fusor Printed Name: Paul L, Fusor	******

IDAHO SECRETARY OF STATE **97/18/2005 05:00** CK: 4773 CT: 158018 BH: 821798 1 8 25.00 = 25.00 ASSUM MAME # 2

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