



CERTIFICATE OF ASSUMED BUSINESS NAME

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

10 APR 23 AM 8:36

SECRETARY OF STATE
STATE OF IDAHO

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:

Rustic North Furniture and Design

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

Brandon S Kimbell

202 Fort Henry Loop Rexburg, Id. 83440
359 W. 3rd St. Rexburg Id 83440

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

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

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

Brandon S. Kimbell
202 Fort Henry Loop
Rexburg, Id. 83440

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Idaho Secretary of State
450 N 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):

Signature: _____

Brandon S. Kimbell
(Signature required)

Printed Name: Brandon S. Kimbell

Capacity/Title: DBA Sole Proprietor

(see instruction # 8 on back of form)

Secretary of State use only

g:\compliance\forms\labn.p85
Revised 04/2003

IDAHO SECRETARY OF STATE
04/23/2010 05:00
CK: 1040001949 CT: 150010 BH: 1219061
1 @ 25.00 = 25.00 ASSUM NAME # 2

D 138713