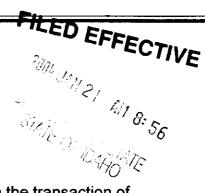


(see instruction # 8 on back of form)

## **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. NOTE: See instructions on reverse before filing.



072314

The assumed business name which the uncleanable.	dersigned use(s) in the transaction of
business is:	
VICK'S HOUSE OF CANDLES	<del></del>
2. The true name(s) and <u>business</u> address(es business under the assumed business namename)  Name  PAULA A VICK  RICK D VICK	· · · · · · · · · · · · · · · · · · ·
3. The general type of business transacted un	nder the assumed business name is:
<ul> <li>Wholesale Trade ☐ Construction</li> <li>☐ Services ☐ Agriculture</li> <li>☐ Manufacturing ☐ Mining</li> <li>☐ Finance, Insurance, and Real Estate</li> </ul>	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
4. The name and address to which future correspondence should be addressed:  PAULA A VICK PO BOX 719 FRUITLAND 1D 8369	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than # 4 above):	ent Phone number (optional):
	Secretary of State use only
Signature: Que Vick  Printed Name: PAULA A VICK  Capacity/Title: OWNER	IDAHO SECRETARY OF STATE  O1/21/2004 O5 = 00  CK: 44112915746 CT: 158810 BH: 722883  I # 25.80 = 25.80 ASSUM NAME # 2