



**CERTIFICATE OF
ASSUMED BUSINESS NAME**

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

88 BEC 17 AM 10:46

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

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

FAUXX GRAPHIX

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name GARRY LEE DUMAS Complete Address 905 POST CIRCLE APT. B
KIMBERLY, ID. 83341

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 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:

GARRY DUMAS / FAUXX GRAPHICS
905 Post Circle Apt B
Kimberly, ID 83341

**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

Printed Name: GARRY DUMAS

Capacity/Title: OWNER / OPERATOR

(see instruction # 8 on back of form)

A comparison of two forms of pectin 885

Secretary of State use only

IDaho SECRETARY OF STATE
12/17/2008 05:00
CK: 271 CT: 232389 BH: 1148712
1 0 25.00 = 25.00 ASSUM NAME # 2

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