



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2015 JAN 15 AM 9:14

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

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

FISH FEATHERS STUDIO

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

Robert J. Moore

2955 ATTWOOD LANE
KUNA, IDAHO 83634

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

- ☒ Retail Trade ☐ Transportation and Public Utilities
☐ Wholesale Trade ☐ Construction
☐ Services ☐ Agriculture
☐ Manufacturing ☐ Mining
☐ 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:

ROBERT MOORE
2955 N. ATTWOOD LANE
KUNA IDAHO 83634

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

Signature: _____

Printed Name: ROBERT MOORE

Capacity/Title: OWNER

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

01/15/2015 05:00

CK:11303 CT:305235 BH:1457382
1@ 25.00 = 25.00 ASSUM NAME #2

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