

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name.

FEB 13 1 14 PM



SECRETARY OF STATE
STATE OF IDAHO

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

Tole Time

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

Name

Complete Address

Diana Hanson

1921 Mary

Meridian, Idaho
83642

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

☐

Retail Trade

☐

Manufacturing

☐

Transportation and Public Utilities

☒

Wholesale Trade

☐

Agriculture

☐

Finance, Insurance, and Real Estate

☐

Services

☐

Construction

☐

Mining

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

Tole Time

1921 Mary

Meridian, Id 83642

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

Signature: Diana Hanson

Printed Name: Diana Hanson

Capacity: owner

(see instruction # 8 on back of form)

Submit Certificate of
Assumed Business
Name and \$20.00 fee to:

Secretary of State
700 West Jefferson
Basement West
PO Box 83720
Boise ID 83720-0080
208 334-2301

Secretary of State use only

IDAHO SECRETARY OF STATE

DATE 02/13/1997

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CK #: 5009 CUST#: 76555

ASSUM NAME 10 20.00= 20.00

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