



CERTIFICATE OF ASSUMED BUSINESS NAME FILED/EFFECTIVE

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

02 APR 15 AM 10:41
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:

Villa Decor Interiors

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

<u>Name</u>	<u>Complete Address</u>
<u>Sandie Gibson</u>	<u>9350 Riverside Dr.</u>
	<u>Boise, Idaho 83703</u>

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 checked="" type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input 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:

Villa Decor Interiors
9350 Riverside Dr.
Boise, Idaho 83703

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

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

N/A

Phone number (optional):
(208) 819-5055

Signature: Sandie Gibson

Printed Name: SANDIE GIBSON

Capacity/Title: Owner

(see instruction # 8 on back of form)

g:\comp\forms\labn form\stabin.p65 Revised 01/2001

Secretary of State use only

IDAHO SECRETARY OF STATE
04/15/2002 05:00
CK: 3107 CT: 150010 BH: 459348
1 @ 20.00 = 20.00 ASSUM NAME # 2

D5 3943