



# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

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.

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

Stone Memories

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

Kim Bailey

476 W Orchard Ave H101, Nampa, ID 83657

Yvonna Bocci

6927 Parkway Ln., Nampa, ID 83687

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:

Phone number (optional): \_\_\_\_\_

Yvonna Bocci

6927 Parkway Ln.

Nampa, ID 83687

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

Same

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

Signature: Yvonna J. Bocci

Printed Name: Yvonna J. Bocci

Capacity: CO-OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

11/04/1998 09:00  
CX: 2140 CT: 106321 MI: 150066

1 @ 20.00 = 20.00 ASSUM NAME # 2

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Revision 1/08

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