



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

## FILED EFFECTIVE

02 AUG -8 AM 11:40

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:

LISA'S YARN SHOPPE

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

LISA K. BULONE

46 E. PINE AVE.

MERIDIAN, IDAHO 83642

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

LISA K. BULONE

46 E. PINE AVE

MERIDIAN IDAHO

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):

LISA K. BULONE

921 TIME AVE

BREMERTON WA 98312

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

Signature: Lisa K. Bulone

(signature required)

Printed Name: LISA K. BULONE

Capacity/Title: PROPRIETOR

(see instruction # 8 on back of form)

Secretary of State use only

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Revised 07/2002

IDAHO SECRETARY OF STATE  
08/08/2002 05:00  
CK: 1743 CT: 162555 BH: 481654  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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