

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

09 MAR 20 AM 8: 2

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

The assumed business name which the undersigned use(s) in the transaction of business is: Fabiano Design Id	
The true name(s) and business address business under the assumed business n Name Bettina Fabiano	
3. The general type of business transacted Retail Trade	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
Bettina Fabiano PO BOX 14927 Long Beach CA 90853 Signature: Dellina Fabiano Capacity/Title: Owner (see instruction # 8 on back of form)	Secretary of State use only Source Source State use only Source State use only IDANO SECRETARY OF STATE 93/20/2009 95:86 CK: 4366 CT: 186365 BH: 116216 1 9 25.80 = 25.00 ASSUM NAME