## 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 Nante ORF 1. The assumed business name which the undersigned use(s) in the transaction business is: IDAHO EVENT SPECIALTIES 2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are: Complete Address Name Kathryn K. Shaver 118 E. Curling Drive, Boise 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 Phone number (optional): \_ correspondence should be addressed: Kathryn K. Shaver Submit Certificate of Assumed Business 118 E. Curling Drive Name and \$20.00 fee to: Boise, ID 83702 Secretary of State 700 West Jefferson 5. Name and address for this acknowledgment Basement West CODY IS (if other than # 4 above): PO Box 83720 Boise ID 83720-0080 208 334-2301 Secretary of State use only IDAHO SECRETARY OF STATE

Signature:

Printed Name: Kathryn K. Shaver

Capacity: **Owner** 

(see instruction # 8 on back of form)

09/01/1999 09:00 CK: 22487 CT: 5403 BH: 246558

29.00 = 29.00 ASSUM NAME # 2

1) *2883*7