

## CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.
NOTE: See instructions on reverse before filing.

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1.	The assumed business name which the undersigned business is:	Ö
2.	The true name(s) and <u>business</u> address(es) of the elbusiness under the assumed business name:  Name  Rhonda K. W. K. Strom 1904	Complete Address
3.	The general type of business transacted under the and Retail Trade Transportation and Public Wholesale Trade Construction Services Agriculture Manufacturing Mining  Finance, Insurance, and Real Estate	
4.	The name and address to which future correspondence should be addressed:  Rhonda Witstom Couture X-trem  1904 Birch Dr  Lewiston, Id 8501	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):	Phone number (optional):

Secretary of State use only

Signature: Rhonda Wikstrom

Capacity/Title: Dwner

(see instruction # 8 on back of form)

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IDAHO SECRETARY OF STATE

08/02/2004 05:00

CK: 5139 CT: 158010 BH: 758486
1 0 25.00 = 25.00 ASSUM NAME # 2

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