



# 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**

2005 AUG 18 AM 8:55

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:

Silver Leaf Design

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

Tasha Johns

1875 W. Lake Pointe Ct.

Nampa, Idaho 83651

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:

Tasha Johns

1875 W. Lake Pointe Ct.

Nampa, Idaho 83651

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

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

Phone number (optional):

Secretary of State use only

Signature:

*Tasha Johns*

(signature required)

Printed Name:

Tasha Johns

Capacity/Title:

Owner

(see instruction # 8 on back of form)

g:\corp\forms\abn\_form\stlabn.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
08/18/2005 05:00  
CK: 200 CT: 150010 BH: 906934  
1 @ 25.00 = 25.00 ASSUM NAME # 2

D90804