



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

2012 JUL 14 AM 9:02

Please type or print legibly.
Instructions are included on back of application.

SECRETARY OF STATE
STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is:

Bergstrom's Norsemen Music

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

Arthur E. Bergstrom

2887 N. Marburg Ave., Meridian, ID 83646

Cynthia E. Bergstrom

2887 N. Marburg Ave., Meridian, ID 83646

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input checked="" type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

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

A. E. Bergstrom,

Bergstrom's Norsemen Music

2887 N. Marburg Ave., Meridian, ID 83646

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

Same as #4

Signature: *Arthur E. Bergstrom*

Printed Name: Arthur E. Bergstrom

Capacity/Title: Owner-Manager

Signature: _____

Printed Name: _____

Capacity/Title: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
06/14/2012 05:00
CK: 3822 CT: 158818 BH: 1328286
1 @ 25.00 = 25.00 ASSUM NAME # 2

DIS6275