



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

11 JAN 18 AM 9:09

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:

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2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name	Mail: Complete Address
David Jones	PO Box 747, Tona, Idaho
Ana Jones	83427
	Street: 5329 Free Ave
	Tona, Id, 83427

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 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:

David Jones
PO Box 747
Tona, Id, 83427

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

X

Signature: [Signature]

Printed Name: David Jones

Capacity/Title: Owner

Signature: _____

Printed Name: Ana Jones

Capacity/Title: Owner

Secretary of State use only

IDAHO SECRETARY OF STATE
01/18/2011 05:00
CK: 58783358725 CT: 158810 BH: 1255601
1 @ 25.00 = 25.00 ASSUM NAME # 2

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