

CERTIFICATE OF ASSUMED BUSINESS NAME

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

2013 APR -2 AM 8: 49

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

SECRETARY OF STATE STATE OF IDAHO

Westwind Quilting The true name(s) and <u>business</u> address(business under the assumed business name).	ame:
<u>Name</u> Carol L. Goe	Complete Address 1100 E 5000 S, Victor, ID 83455
3. The general type of business transacted Retail Trade Wholesale Trade Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estat 4. The name and address to which future correspondence should be addressed: Westwind Quilting 1100 E 5000 S Victor, ID	Submit Certificate of
5. Name and address for this acknowledgme copy is (if other than # 4 above):	
gnature: Cawld Doe	Secretary of State use only
inted Name: Carol L. Goe	
apacity/Title: Sole Proprietor	
gnature:	IDAHO SECRETARY OF STATE
inted Name:	CK: 984 CI: 201393 BH: 13674 1 0 25.00 = 25.80 ASSUM NAME
apacity/Title:	THE PARTY NAME

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