

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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.

SECRETARY OF STATE OF IN

D3 DEC - 1 AM 10: 50 SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the unde	rsigned use(s) in the transaction of
business is:	
River City Jewelry a	and Gitts
7,100	
2. The true name(s) and business address(es) of	of the entity or individual(s) doing
business under the assumed business name:	
Name	Complete Address
	6881 W. State St. #7
Mebecca A. Lenon	7 - TI Could
	Boise, Id. 83/19
	d
3. The general type of business transacted unde	er the assumed business name is:
Transportation of	and Public Utilities
M Retail Hade	and Public Othities
Wholesale Trade Construction	
Services Agriculture	Submit Certificate of
☐ Manufacturing ☐ Mining	Assumed Business
Finance, Insurance, and Real Estate	Name and \$25.00 fee to:
	On another of State
4. The name and address to which future	Secretary of State 700 West Jefferson
correspondence should be addressed:	Basement West
Beeks Lenon	PO Box 83720
6881 W. State St. #1	Boise ID 83720-0080
	208 334-2301
Koise, Idaho 53714	
5. Name and address for this acknowledgmen	t Phone number (optional):
CODY is (if other than # 4 above):	208. Blan
copy is (if other than # 4 above).	208 Begg
	Secretary of State use only
	59d c
Signature Wy Xeron	(원) 원
(signature required)	IDAHO SECRETARY OF STATE 12/01/2003 05 m00 CK: 2008 CT: 158810 BH: 714189 1 0 25.00 = 25.00 ASSUM NAME # 2
Printed Name: <u>Bettley Lenon</u>	CK: 2006 CT: 158010 BH: 714189
Capacity/Title:	IDAHO SECRETARY OF STATE 12/01/2003 05 = 00 CK: 2006 CT: 158010 BH: 714189 1 0 25.00 = 25.00 ASSUM NAME # 2
(see instruction # 8 on back of form)	9 5
(See monucion # o on pack of form)	D 7/04/
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