

FILED EFFECTIVE

227



CERTIFICATE OF ASSUMED BUSINESS NAME

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.

2005 OCT 24 AM 10:02

CLERK OF STATE
BOISE, IDAHO

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

Word Designs

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

Name
Kimberly Anderson

Complete Address
599 BOXWOOD DRIVE
TWIN FALLS, ID. 83301

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

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

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

Kimberly Anderson
599 Boxwood Drive
Twin Falls, ID. 83301

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

Phone number (optional):

Signature:

Printed Name:

Capacity/Title:

(see instruction # 8 on back of form)

Kimberly P. Anderson
Kimberly P. Anderson
owner

Secretary of State use only

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Revised 06/2003

IDAHO SECRETARY OF STATE
10/24/2005 05:00
CK: 1071 CT: 150010 BH: 918376
1 @ 25.00 = 25.00 ASSUM NAME # 2

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