



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

12 MAR 23 AM 9:26  
SECRETARY OF STATE  
STATE OF IDAHO

Please type or print legibly.

Instructions are included on back of application.

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

Sister C's Toppers

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

<u>Name</u>	<u>Complete Address</u>
Cecelia Franks	1705 N Lea st Post Falls, ID 83854
James Rhodes	1705 N Lea st Post Falls, ID 83854

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

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

Cecelia Franks Toppers  
3617 E Ponderosa blvd.  
Post Falls, Id 83854

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

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: Cecelia Franks

Printed Name: Cecelia Franks

Capacity/Title: Owner

Signature: James Rhodes

Printed Name: James Rhodes

Capacity/Title: Owner

Secretary of State use only

IDAHO SECRETARY OF STATE  
04/24/2012 05:00  
CK: 204019302883 CT: 269635 BH: 1321113  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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