

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2005 (4.0) (p.g. p.g.

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.

Glow Roses & Gifts 2. The true name(s) and business address(e business under the assumed business name Name Deborah L. W. Ison	Complete Address 4914 Schlics Avc
3. The general type of business transacted ur	nder the assumed business name is:
Retail Trade	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
 Name and address for this acknowledgment copy is (if other than # 4 above): 	Phone number (optional):
	Secretary of State use only
Signature: (signature required) Printed Name: Deborah L. (VISO) Capacity/Title: Owner (see instruction # 8 on back of form)	IDAHO SECRETARY OF STATE Object

D89321