CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the undersigned of AM 8: 52 gives notice of adoption of an Assumed Business 10

gives notice of adoption of an	Assumed Business Name TARY UP STATE
The assumed business name which the business is:	undersigned use(s) in the transaction of
Back to the Basics	
The true name(s) and business address: business under the assumed business n	(es) of the entity or individual(s) doing name is/are:
<u>Name</u>	Complete Address
Rhonda Maggard	P.O. Box 416 Nampa, 10 83653
The general type of business transacted (mark only those that apply)	d under the assumed business name is:
Retail Trade Manufactu Wholesale Trade Agriculture Services Construction	e Finance, Insurance, and Real Estate
4. The name and address to which future correspondence should be addressed:	Phone number (optional): 466-4530
Rhanda Maggard	Submit Certificate of
2211 Les Drive	Assumed Business Name and \$20.00 fee to:
Nampa 10 83651	_ Secretary of State
5. Name and address for this acknowledge	700 West Jefferson ment Basement West
COPY is (if other than # 4 above):	PO Box 83720
	Boise ID 83720-0080 - 208 334-2301
	Secretary of State use only
	IDANG SECRETARY OF STATE
	₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩
gnature: Rhonda Maggard	
	1 @ 20.00 = 20.00 ASSUM NAME
nted Name: Rhonda Maggard pacity: Owner	