

FILED EFFECTIVE



# 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.**

2003 MAR -5 AM 8:59

STATE OF IDAHO

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

Aura

Aura Soma Lava

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

Name

Complete Address

Evelee Hill Rush196 E. Main, P.O. Box 129Robert E. RushLava Hot Springs, ID 83246address same

3. The general type of business transacted under the assumed business name is:

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

Submit Certificate of  
Assumed Business  
Name and **\$20.00** 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:

Evelee HillP.O. Box 129Lava Hot Springs, ID 83246

Phone number (optional):

776-5800

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

n/a

Secretary of State use only

Signature

(signature required)

Printed Name: Evelee Hill RushCapacity/Title: Owner

(see instruction # 8 on back of form)

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Revised 09/2002

IDaho SECRETARY OF STATE  
03/05/2003 05:00  
CK: 3353 CT: 158810 BH: 666643  
1 E 20.00 = 20.00 ASSUM NAME # 3

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