Printed Name: _____

Capacity/Title:



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Please type or print legibly. Instructions are included on back of application.

ST 51	CERTIFICATE OF	=	LILED ELLECTIVE	-
	ASSUMED BUSINESS	S NAM	ned ame.	
	Pursuant to Section 53-504, Idaho Code, ti	he undersig	ned	
7 2	submits for filing a certificate of Assumed I	Business Na	ame. 9.	دج'
	Please type or print legibly. Instructions are included on back of app	olication.	The grown	
			10 M	
1.	The assumed business name which the undersigned use(s) in the transaction of ousiness is:			
	Mum's	The Word		
2.	The true name(s) and <u>business</u> address(es) of the entity or individual(s) doing business under the assumed business name:			
	<u>Name</u>		Complete Address	
	Karen Ritchie	5188 Farr	ow Street Boise ID 83713	
			<u> </u>	
3.	The general type of business transacted under the assumed business name is:			
	Retail Trade I ransportation Wholesale Trade Construction	n and Ful	one offices	
	Services Agriculture	!		
	☐ Manufacturing ☐ Mining		Submit Certificate of	
	Finance, Insurance, and Real Estate	.	Assumed Business Name and \$25.00 fee to:	
_	·	,	Name and \$25.00 lee to.	
4.	The name and address to which future		Secretary of State	
	correspondence should be addressed: Karen Ritchie		450 North 4th Street PO Box 83720	
	5188 Farrow Street		Boise ID 83720-0080	
	Boise ID 83713		208 334-2301	
E		4		
5.	Name and address for this acknowledgment COpy is (if other than # 4 above):			
	oop, to a out a anni a casto,.			
			Secretary of State use only	
Siana	ature: Karen Ritchie		•	
	,			
	ed Name: Karen Ritchie city/Title: Owner			
•	ature:		IDAHO SECRETARY OF STATE	
oryi id	ituit	1	02/14/2012 05:00	

02/14/2012 05:00 CK: 3485 CT: 158018 BH: 1318683 1 0 25.00 = 25.00 ASSUM NAME # 2

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