

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

## FILED/EFFECTIVE

D59420

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

02 OCT 25 PM 2: 28

Please type or print legibly. NOTE: See instructions on reverse before filing.

(see instruction #8 on back of form)

STATE OF ID STATE

	STATE UP IDAHO
The assumed business name which the undersigned business is:	ed use(s) in the transaction of
Trading Places Consignment Hor	me Furnishings
2. The true name(s) and <u>business</u> address(es) of the e business under the assumed business name:  Name  Carrianne Reda  1256	9
3. The general type of business transacted under the	assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720
	Secretary of State use only
Signature: <u>Carrianne Recla</u> Printed Name: <u>Carrianne Recla</u> Capacity/Title: <u>Partner</u>	IDAHO SECRETARY OF STATE 10/25/2002 05:00 CK: 3427 CT: 164516 BH: 642694 1 0 20.00 = 20.00 ASSUM NAME # 2