



# CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

2007 JUL 12 PM 1:01

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 filling.

SECRETARY OF STATE  
STATE OF IDAHO

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

Julie's

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

Name

Julie Morrison

Complete Address

PO Box 462; Worley, ID 83876

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 type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

Julie Morrison

PO Box 462

Worley, ID 83876

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

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

Phone number (optional):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Secretary of State use only

Signature: Julie Morrison  
(signature required)

Printed Name: Julie Morrison

Capacity/Title: Owner

(see instruction # 8 on back of form)

Form 1000  
Revised 04/2003

IDaho SECRETARY OF STATE  
07/12/2007 05:00  
CK: 174 CT: 158818 RH: 1065266  
1 # 25.00 = 25.00 ASSUM NAME # 2

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