

# 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 gives notice of adoption of an Assumed Business Name.

FILED/EFFECTIVE  
JUN 16 AM 9:29

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

Our Family Plaques

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

Name	Complete Address
<u>Andrea Jardine</u>	<u>3379 E. 500 N. Lewisville, ID 83431</u>
<u>Renee Hill</u>	<u>Box #6 RR2 Andrie, AB CANADA</u>
	<u>T4B2A4</u>

3. The general type of business transacted under the assumed business name is:  
(mark only those that apply)

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

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

Phone number (optional): \_\_\_\_\_

Andrea Jardine  
3379 E. 500 N.  
Lewisville, ID 83431

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

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

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:  
25.00

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Secretary of State use only

Signature: Andrea Jardine

Printed Name: Andrea Jardine

Capacity: Owner/President

(see instruction # 8 on back of form)

Revision 2/97  
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IDAHO SECRETARY OF STATE  
06/16/2003 05:00  
CK: 200 CT: 150010 BH: 686165  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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