



CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

FILED

To the SECRETARY OF STATE, STATE OF IDAHO **98 APR 27 PM 3:25**
Pursuant to Section 53-504, Idaho Code, the undersigned
gives notice of adoption of an Assumed Business Name **SECRETARY OF STATE**
STATE OF IDAHO

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

D & D STAMPERS

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>DENISE D. WOLFE</u>	<u>2900 FARM TO MARKET RD</u>
	<u>MIDVALE, ID 83645</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): _____

DENISE D. WOLFE
2900 FARM TO MARKET RD
MIDVALE, ID 83645

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

SAME

Submit Certificate of Assumed Business Name and \$20.00 fee
 Secretary of State
 700 West Jefferson
 Basement West
 PO Box 83720
 Boise ID 83720-0080
 208 334-2301

98 MAR -5 AM 8:17

Signature: Denise Wolfe

Printed Name: Denise Wolfe

Capacity: Owner

(see instruction # 8 on back of form)

Revision 1/98 g:\ccr\forms\slabn.p85

Secretary of State use only

IMHO SECRETARY OF STATE

05/05/1998 09:00
CR: 184 CT: 98228 BH: 187623

1 @ 20.00 = 20.00 ASSUM NAME

14667