

## **CERTIFICATE OF ASSUMED BUSINESS NAME**

FILED/EFFECTIVE

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 filing.

(see instruction #8 on back of form)

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which the undersigned business is:      Share Enter PRISES	d use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es) of the endusiness under the assumed business name:  Name  Sobby Share Campbell  2224	ntity or individual(s) doing  Complete Address  O Plovsta w  EU ID 83607
3. The general type of business transacted under the a	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 Boise ID 83720-0080 208 334-2301  Phone number (optional):
	Secretary of State use only
ignature: / Class Crandle   Poble (Campbel)  Gapacity/Title: CWN-C	IDAHO SECRETARY OF STATE  02/20/2002 05=00  CK: CASH CT: 157490 BH: 447862  1 0 20.00 = 20.00 ASSUM NAME # 2