

Capacity/Title: OWY) ex

(see instruction # 8 on back of form)

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED/E:

..VE

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

2997 OCT -7 PH 2: 34

CIAIE

Please type or print legibly.

NOTE: See instructions on reverse before filing.

Designer Dancewear	
The true name(s) and business address(es) business under the assumed business nam Name Amy L. Horner	of the entity or individual(s) doing le: Complete Address 10029 Mallard Dr. Nampa ID 8
B. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction	der the assumed business name is:
Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and \$20.00 fee to:
The name and address to which future correspondence should be addressed:	Secretary of State 700 West Jefferson Basement West PO Box 83720
Amy Horner 10029 Mallard Dr. Nampa ID 83486	Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme	ent Phone number (optional):
COPY is (if other than # 4 above).	(208) 465-1877
	Secretary of State use only
	abn. p65
gnature: Uny 2. Hono (signature required)	wrised 07/2002 evised 07/2002
rinted Name: Amy L. Horner	aviseo

IDAHO SECRETARY OF STATE
10/07/2002 05:00
CK: 1885 CT: 158010 BH: 574711
1 0 20.00 = 20.00 ASSUM NAME # 2

