

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.

2015 FEB 20 AM 9: 08

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

PLAID & PEARLS	
2. The true name(s) and business address business under the assumed business to	name:
Name	Complete Address
VICKI L. FOUNTAIN	1290 GRAY EAGLE RD. GENESSEE, ID. 8
3. The general type of business transacted	t under the assumed business name is:
5. The general type of business authousted	and the assamed business marks to.
Retail Trade Transporta	ation and Public Utilities
Wholesale Trade ☐ Construction	ion
Services Agriculture	e Submit Certificate of
Manufacturing Mining	Assumed Business
	Name and \$25.00 fee to:
	ate
4. The name and address to which future	Idaho Secretary of State
correspondence should be addressed:	450 N 4th Street
004 MAIN OT CUTIE D	PO Box 83720
621 MAIN ST. SUTIE D	Boise ID 83720-0080
LEWISTON, ID. 83501	
	(208) 334-3301
5. Name and address for this acknowledge	gment Phone number (optional):
copy is (if other than # 4 above).	509-336-1331
	Secretary of State use only
	☐ 1DAHO SECRETARY OF STATE
1. 12. 10	02/20/2015 05:00
gnature: ////////////////////////////////////	CK: 2384 CT: 281867 BH: 146273
(signature required)	2
inted Name: <u>VICKI FOUNTQU</u>	
apacity/Title:(())\(\right)\)	02/20/2015 05:00 02/20/2015 05:00 CK:2384 CT:281867 BH:146273 16 25:00 = 25:00 ASSUM NAME
- (_/////////	- Jan 176902