Capacity: Presiden

(see instruction # 8 on back of form)

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 section 53-504, Idaho Code, Idaho

	The assumed business name which the undersigned use(s) in the transaction of business is:
	Hajis Inspiration
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
	Kimberly Delaney 3700 E 16 Ave Post Falls 10 83
3.	The general type of business transacted under the assumed business name is: (mark only those that apply)
	Retail Trade
4.	
4.	The name and address to which future Phone number (optional): 208-777-949
	The name and address to which future correspondence should be addressed: **The name and address to which future correspondence should be addressed: **The name and address to which future correspondence should be addressed: **Submit Certificate of Assumed Business Name and \$20.00 fee to: **Post Falls 1D 83854* Secretary of State 700 West Jefferson
	The name and address to which future correspondence should be addressed: **Timberly Delaney** Submit Certificate of Assumed Business Name and \$20.00 fee to: **Post Falls 10 83859** Secretary of State**
	The name and address to which future correspondence should be addressed: **The Delane** Submit Certificate of Assumed Business Name and \$20.00 fee to: **Post Falls 1D 83854* Name and address for this acknowledgment copy is (if other than # 4 above): 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

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