CERTIFICATE OF ASSUM (Please type or print legibly. S	MED BUSINESS NAME see instructions on reverse.
To the SECRETARY OF STATE, STAT Pursuant to Section 53-504, Idal gives notice of adoption of an As	ΓΕ OF IDAHO ho Code, the undersign €c , 305 ρ _k ,
1. The assumed business name which the un business is: Gold Elegance	dersigned use(s) in the transaction of
 The true name(s) and business address(es business under the assumed business named) 	s) of the entity or individual(s) doing
Joanne K. Franklin	Complete Address 3662 N. Sawgrass Way Boise ID 83704
3. The general type of business transacted ur (mark only those that apply)	
☐ Retail Trade ☐ Manufacturing ☐ Wholesale Trade ☐ Agriculture ☐ Services ☐ Construction	☐ Finance, Insurance, and Real Estate ☐ Mining
4. The name and address to which future P correspondence should be addressed:	Phone number (optional):208-375-2890
Joanne K. Frankin 3662 N. Sawgrass way	Submit Certificate of Assumed Business Name and \$20.00 fee to:
5. Name and address for this acknowledgmer copy is (if other than # 4 above):	Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
	Secretary of State use only IDAHO SECRETARY OF STATE
Signature: Joanne K. Franklin	IDAHO SECRETARY OF STATE 88/68/2800 09:00 CK: 4001 CT: 134487 BH: 339596 1 0 26.08 = 28.00 ASSUM NAME # 2
Printed Name: Joanne K. Franklin	
Capacity: Sole Proprietor, Duner (see instruction # 8 on back of form)	D 3 8008