

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

Pursuant to Section 53-504, Idaho Code, the undersign 2005 FEB 17 Pil 2: 07

Please type or print legibly. NOTE: See instructions on reverse before filing.

Owner

(see instruction # 8 on back of form)

Capacity/Title:

STATE OF TUARO

Curiosity Shoppe	
he true name(s) and business address(es) of the usiness under the assumed business name:	
Name	Complete Address
Linda R. Reid	436 W. Hwy. 26
	Blackfoot, ID 83221
Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate ne name and address to which future orrespondence should be addressed: Curiosity Shoppe 436 W. Hwy. 26	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080
	208 334-2301
Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional): 208-785-1781
	Secretary of State use only
Name:	Secretary of State use only

IDANO SECRETARY OF STATE

02/17/2005 05:00

CK: 3528 CT: 158010 BH: 793909

1 0 25.00 = 25.00 ASSUM NAME # 2