

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on reverse.)

To the SECRETARY OF STATE, STATE OF IDAHO 97 OCT - 1 AM 9:10



1. The assumed business name which the undersigned use(s) in the transaction of business is:

Specialty Merchandise Emporium

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:

<u>Name</u>	<u>Complete Address</u>
CHARLOTTE LEER	273 N 3500 E MOOR SECT, RIGBY, ID 83442
DIANE MOORE	369 N 3500 E RIGBY, ID 83442

3. The general type of business transacted under the assumed business name is:
(mark only those that apply)

Retail Trade Manufacturing Transportation and Public Utilities
 Wholesale Trade Agriculture Finance, Insurance, and Real Estate
 Services Construction Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): (208) 754-4826

Charlotte Lees
Po Box 504
Rigby, ID 83442

5. 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
208 334-2301

Signature: Charlotte Lee

Printed Name: Charlotte Lee

Capacity: Large fair

(see instruction # 8 on back of form)

Secretary of State was only
IDAHo SECRETARY OF STATE
10/01/1997 09:00
X: 401 CI: 87935 BH: 43232
1 0 28.00 = 28.00 ASSIST NAME

100.00 + 10.00 ~~110.00~~ NAME

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4. *Microbial Ecology* 1996, 32, 111-118. © 1996 Kluwer Academic Publishers. Printed in Belgium.

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