

# 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, I, the undersigned, on AUG 28 AM 9:03

gives notice of adoption of an Assumed Business Name.

1. The assumed business name which the undersigned uses in the transaction business is:

Geri's Hawaiian Ice

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
<u>Liljenquist Chiropractic (C-111129)</u>	<u>1700 Overland Burley ID 83318</u>
<u>Geri E. Cody Liljenquist</u>	<u>1700 Overland Burley ID 83318</u>

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

<input checked="" type="checkbox"/> Retail Trade?	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Agriculture	<input type="checkbox"/> Finance, Insurance, and Real Estate
<input type="checkbox"/> Services	<input type="checkbox"/> Construction	<input type="checkbox"/> Mining

4. The name and address to which future correspondence should be addressed: Phone number (optional): \_\_\_\_\_

Geri's Hawaiian Ice

1700 Overland

Burley ID 83318

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

Secretary of State use only

Signature: Geri Liljenquist

Printed Name: Geri Liljenquist

Capacity: owner

(see instruction # 8 on back of form)

Revision 2/97

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IDAHO SECRETARY OF STATE  
08/25/2003 05:00  
CK: 675 CT: 150018 BH: 690103  
1 @ 25.00 = 25.00 ASSUM NAME # 3

D 68325



FILED EFFECTIVE  
AUG 25 AM 9:51  
STATE OF IDAHO