



# CERTIFICATE OF ASSUMED BUSINESS NAME

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

**FILED**

To the SECRETARY OF STATE, STATE OF IDAHO

Pursuant to Section 53-504, Idaho Code, the undersigned  
gives notice of adoption of an Assumed Business Name.

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

Colwell Enterprises

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

Jaclynn M Boyle

Name

Complete Address

1356 S. Linda Vista Boise

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:

Jaclynn M Boyle  
1356 S Linda Vista  
Boise, Id 83709

Phone number (optional): \_\_\_\_\_

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

Revision 198

corpNameStatn.p65

Secretary of State use only  
**IDAHO SECRETARY OF STATE**

**01/07/1999 09:00**  
CK: CASH CT: 109256 BH: 176639

**1 P 20.00 = 20.00 ASSUM NAME # 2**

**D21849**

Signature: Jaclynn M Boyle

Printed Name: Jaclynn M. Boyle

Capacity: President & Owner

(see instruction # 8 on back of form)