

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

FILED EFFECTIVE 2015 MAR 10 AM 9: 00

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly. Instructions are included on back of application.

The assumed business name which the	
business is: Spectrum II Art and Dance Studio (Plea	ise note Spectrum I Rumeral
The true name(s) and <u>business</u> address business under the assumed business	name: Eleven
Name	Complete Address
Shelly Werner	Spectrum II Art and Dance Studio
	525 South Main Street
	Moscow, ID 83843
3. The general type of business transacte Retail Trade Transporta Wholesale Trade Services Agricultur	ation and Public Utilities tion
ManufacturingMiningFinance, Insurance, and Real Est	Submit Certificate of Assumed Business tate Name and \$25,00 fee to:
The name and address to which future correspondence should be addressed: Shelly Werner 117 S. Almon Street	450 North 4th Street PO Box 83720 Boise ID 83720-0080
Moscow, ID 83843	_ 208 334-2301
5. Name and address for this acknowledg copy is (if other than # 4 above):	ment
Signature: Shelled (Prines)	Secretary of State use only
Printed Name: Shelly Werner	IDAHO SECRETARY OF STATE
Capacity/Title: Owner, Art Instructor, Dance Instruct	O3/10/2015 05:00 CK:1400 CT:307467 BH:1465432
Signature:	10.25~00 = 25~00~ASSUM NAME 42
Printed Name:	
Capacity/Title:	D177420

abn pmd Rev. 07/2010