

Printed Name: Ste

(see instruction # 8 on back of form)

Capacity/Title:_

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

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



The true name(s) and business address(es) of	the entity or individual(s) doing
business under the assumed business name: Name	Complete Address
Stephanie Bates	PUX F AVE A
	Nerdell, Idaho
	9855
Retail Trade Transportation and Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate The name and address to which future correspondence should be addressed:	Submit Certificate of Assumed Business Name and \$25.00 fee to: Secretary of State 700 West Jefferson Basement West
Stephanie Bates 248 E. Ave A Wendell, Idaho 83355	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):

IDAHO SECRETARY OF STATE

@2/12/2007 @5:00

CK: 3790114272 CT: 158010 BH: 1032144
1 0 25.00 = 25.00 ASSUM NAME # 2