



CERTIFICATE OF ASSUMED BUSINESS NAME AN 11 AM 8: 56

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

Please type or print legibly.

NOTE: See instructions on reverse before filling

| NOTE: See instructions on reverse before 1. The assumed business name which the unbusiness is: | • |
|--|---|
| DIANE JAMES I | NTERIOR DRSION |
| 2. The true name(s) and business address(es business under the assumed business name Name Diane James | o) of the entity or individual(s) doing ne: Complete Address BOX 687 PICABO ID 83348 |
| 3. The general type of business transacted un Retail Trade Transportation Wholesale Trade Construction Services Agriculture | and Public Utilities |
| Manufacturing Mining Finance, Insurance, and Real Estate | Submit Certificate of Assumed Business Name and \$25.00 fee to: |
| 4. The name and address to which future correspondence should be addressed: Box 687 PICABO ID 83348 | Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 |
| 5. Name and address for this acknowledgmer copy is (if other than #4 above); | Phone number (optional): 788-3766 |
| | Secretary of State use only |
| Signature: | IDAHO SECRETARY OF STATE 1 1 1 2 2 3 6 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |