

CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.



business is: DESIGNS	
The true name(s) and <u>business</u> address(es) of the business under the assumed business name: Name DENISE BUSICE 128 LINDA SACKSON 728	Complete Address Boise
. The general type of business transacted under the	e assumed business name is:
Retail Trade	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
BoisE, Id. 83709 5. Name and address for this acknowledgment copy is (if other than #4 above):	208 334-2301 Phone number (optional): 28 8-322- 945 2
SAME	Secretary of State use only

Printed Name: LINDH D. JA CICSON

(see instruction #8 on back of form)

Capacity/Title: PARTNER

IDAHO SECRETARY OF STATE

06/25/2002 05:00

CK: 1514 CT: 158010 BH: 473799

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