

# CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly)

**FILED**

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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.

SECRETARY OF STATE  
STATE OF IDAHO

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

Timeless Treasures

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

Name	Complete Address
<u>Pipe Repair Products Inc.</u>	<u>230 Bob Barton Rd. Jerome, Id. 83338</u>
<u>C123467</u>	

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:

Timeless Treasures  
230 Bob Barton Rd.  
Jerome, Idaho 83338

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

Secretary of State use only

IDAHO SECRETARY OF STATE

01/14/2000 09:00  
CK: 1153 CT: 125232 BH: 201622

1 @ 20.00 = 20.00 ASSUM NAME # 2

D 32167

Signature: Pipe Repair Products Inc.  
Carol Schlund  
Printed Name: CAROL Schlund  
Capacity: Secretary

(see instruction # 8 on back of form)