

Printed Name: }

Capacity/Title: Secretary

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersign APR 3 PM / 33 Pursuant to Section 53-504, Idaho Code, the undersigned of the submits for filling a certificate of Assumed Business Name.

SECRETARY OF TO AHOUSE

NOTE: See instructions on reverse before filing.

<ol> <li>The assumed business name which the undersigned business is:</li> </ol>	ed use(s) in the fransaction of E STATE OF IDAHO
Lody Buckaria Boutique	ON THE OTHER TO
2. The true name(s) and <u>business</u> address(es) of the business under the assumed business name:  Name  Roxanne Sanchez 20 E  TETON TINNERY INC.  Drag	Complete Address
3. The general type of business transacted under the  Retail Trade Transportation and Pu Wholesale Trade Construction	
Services Agriculture  Manufacturing Mining  Finance, Insurance, and Real Estate	Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:
<ol> <li>The name and address to which future correspondence should be addressed:</li> </ol>	Secretary of State 700 West Jefferson
Lody Bickaroo Boutique 20 E Haward-P.O Box 259 Doggs, Idaho 53422	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgment copy is (if other than # 4 above):	Phone number (optional):
	Secretary of State use only

IDAHO SECRETARY OF STATE 03/31/2006 05:00 CK: 1319 CT: 113950 BH: 946529 1 8 25.80 = 25.80 ASSUM NAME # 2

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