

(see instruction # 8 on back of form)

## **CERTIFICATE OF** ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name. 06 FEB 13 PM 1: 17

HEED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

D96450

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

The assumed business name which the un business is:  Amagin	dersigned use(s) in the transaction of
2. The true name(s) and <u>business</u> address(es business under the assumed business name Name  Amanda R. Sutton  Geoffrey S. Sutton	S) of the entity or individual(s) doing ne:  Complete Address  7671 w Fron ct.  Boise Td 83704
3. The general type of business transacted un  Retail Trade Transportation Wholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate  4. The name and address to which future correspondence should be addressed:  Amanda R Show  Boise, Tol 83704	Submit Certificate of Assumed Business Name and \$25.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgme copy is (if other than #4 above):	Phone number (optional):  208-724-9312
Signature: A Signature required: Signature req	Secretary of State use only  990