

CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

03 NOV 25 PM 2: 50

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE STATE OF IDAHO

1. The assumed business name which the undersigned use(s) in the transaction of business is: Julie Design	
2. The true name(s) and <u>business</u> address(es) of the endusiness under the assumed business name: Name Julie Flynn Scott Flynn Bridger	ntity or individual(s) doing Complete Address 4 N・21 st St. 0 5
3. The general type of business transacted under the assumed business name is: Retail Trade Transportation and Public Utilities Wholesale Trade Construction	
 ☐ Wholesale Trade ☐ Services ☐ 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:	Secretary of State 700 West Jefferson 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
Signature: JULIA B. FLYNN Capacity/Title: GRAPHIC DESIGNER (see instruction # 8 on back of form)	IDANO SECRETARY OF STATE 11/25/2003 05:00 CK: 1642 CT: 158010 BH: 713634 1 0 25.00 = 25.00 ASSUM NAME # 2

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