



**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.

02 JUN 13 PM 3:31

SECRETARY OF STATE
STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

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

Ambiance

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

Name _____

Complete Address

David Scanlon

609 N Copper River Dr, Nampa, ID 83651

3. The general type of business transacted under the assumed business name is:

<input type="checkbox"/> Retail Trade	<input type="checkbox"/> Transportation
<input type="checkbox"/> Wholesale Trade	<input type="checkbox"/> Construction
<input checked="" type="checkbox"/> Services	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Mining
<input type="checkbox"/> Finance, Insurance, and Real Estate	

4. The name and address to which future correspondence should be addressed:

David Swanson
609 N Copper River Dr
Nanaimo, BC V9S 5L1

5. Name and address for this acknowledgment
copy is (if other than # 4 above):

Phone number (optional):

Secretary of State use only

A 55768

Signature: 

Printed Name: (Last) Swanson

Capacity/Title: Owner

(see instruction # 8 on back of form)

IDaho SECRETARY OF STATE
06/13/2002 05:00
CK: 3425 CT: 161168 BH: 471577
1 @ 20.00 = 20.00 ASSUM NAME # 2