

CERTIFICATE OF ASSUMED BUSINESS NAME

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

FILED EFFECTIVE

11 JUL -5 AM 9: 10

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

	sskerfuffle
 The true name(s) and <u>business</u> address(abusiness under the assumed business name) Name 	
Pixie Merrick	1306 Jackson St, Boise, ID 83705
3. The general type of business transacted	under the assumed business name is:
	on and Public Utilities on Submit Certificate of Assumed Business
4. The name and address to which future correspondence should be addressed: Pixie Merrick 130 Dackson St Boise, ID 83705	Secretary of State 450 North 4th Street PO Box 83720 Boise ID 83720-0080 208 334-2301
5. Name and address for this acknowledgm copy is (if other than # 4 above):	nent
gnature: Mend	Secretary of State use only
nted Name: Pixie Merrick	-
pacity/Title: Sole Proprietor gnature:	IDAHO SECRETARY OF STATE 97/95/2911 95:98 CK: 1924 CT: 158018 BH: 1289959 1 8 25.00 = 25.00 ASSUM NAME #
nted Name:	_ !