FILED EFFECTIVE



Capacity/Title:

Sole Proprietor

(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.

2010 APR -7 PM 3 58

SECRETARY OF STATE STATE OF IDAHO

Please type or print legibly.

NOTE: See instructions on reverse before filing.

ity or individual(s) doing Complete Address Swallowtall Pl. Nampa, Idaho 83	686
sumed business name is:	
Submit Certificate of Assumed Business Name and <b>\$25.00</b> fee to:	
Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080	¥
(208) 334-2301	
	e de la composition della comp
Secretary of State use only	
	** • • • · · · · · · · · · · · · · · · ·
	Submit Certificate of Assumed Business Name and \$25.00 fee to: Idaho Secretary of State 450 N 4th Street PO Box 83720 Boise ID 83720-0080 (208) 334-2301

IDAHO SECRETARY OF STATE
04/07/2010 05:00
CK: 416182 CT: 172099 BH: 1216691
1 8 25.00 = 25.88 ASSUM NAME # 2

