27	FILED
CERTIFICATE OF ASSUMED BUSINESS NAME (Please type or print legibly. See instructions on reverse.)	
To the SECRETARY OF STATE, STATE OF IDAHO Pursuant to Section 53-504, Idaho Code, the understand and State	
 The assumed business name which the undersigned ase(s) in the Hansaction of business is: 	
MEETING & EVENT DESIGN	
The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name is/are:	
	Plete Address ASTWATER AVE
PAM LIBENGOOD BOISE, I	0 03 119
 The general type of business transacted under the assumed business name is: (mark only those that apply) 	
Retail Trade Manufacturing Transportation and Public Utilities Wholesale Trade Agriculture Finance, Insurance, and Real Estate Services Construction Mining	
4. The name and address to which future Phone number (optional): (208) 377-4680 correspondence should be addressed:	
MEETING & EVENT DESIGN 3355 N. FIVEMILE RD # 211	Submit Certificate of Assumed Business Name and \$20.00 fee to:
BOISE, FDAHO 83713-3925	Secretary of State 700 West Jefferson
5. Name and address for this acknowledgment copy is (if other than # 4 above): 	Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301
2060 X. FASTWATER BOISE, IDAHO 83713	Secretary of State use only
Signature: Dellana RR	IDANO SECRETARY OF STATE
X I Re	01/20/1998 09:00 CK: 3873 CT: 91547 BH: 74124 1 @ 20.00 = 20.00 ASSUM MAME \
Printed Name: <u>DEADNA KOE</u> Capacity: <u>GENERAL PARTNER</u> (see instruction # 8 on back of form)	D1/335
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