



CERTIFICATE OF ASSUMED BUSINESS NAME

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

Please type or print legibly.

NOTE: See instructions on reverse before filing.

FILED EFFECTIVE

08 MAY 14 AM 8:18

SECRETARY OF STATE
STATE OF IDAHO

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

BLING TO BE SEEN

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

HELEN EVANS

9340 KEMP RD, MIDDLETON ID 83644

CINDY ANDERSON

9340 KEMP RD, MIDDLETON ID 83644

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

- | | |
|--|--|
| <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <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:

CINDY ANDERSON

9340 KEMP RD

MIDDLETON ID 83644

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

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

CINDY ANDERSON

9340 KEMP RD

MIDDLETON ID 83644

Signature: Cindy Anderson

(signature required)

Printed Name: CINDY ANDERSON

Capacity/Title: PARTNER/OWNER

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE
05/14/2008 05:00
CK: NO CK # CT: 225958 BH: 1114947
1 @ 25.00 = 25.00 ASSUM NAME # 2

g:\ccp\form\main form\main.ppt
Revised 04/2003

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