

Michael & Brights
Printed Name:

(see instruction # 8 on back of form)

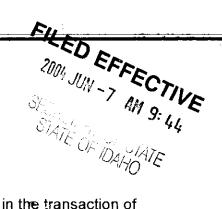
Capacity/Title:

CERTIFICATE OF ASSUMED BUSINESS NAME

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

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: Patio Pleasures 2	
2. The true name(s) and business address(es) of the business under the assumed business name: Name Michael G. Rriggs Sharolyn Briggs 1101.	entity or individual(s) doing Complete Address 16 Hansen Ave Burley ID 8 Hansen Ave Burley ID 833
3. The general type of business transacted under the Retail Trade Transportation and Putholesale Trade Construction Services Agriculture Manufacturing Mining Finance, Insurance, and Real Estate	
4. The name and address to which future correspondence should be addressed: IDL Hansen Ave Burley, ID 83318 5. Name and address for this acknowledgment copy is (if other than # 4 above):	Secretary of State 700 Wesi Jefferson Basement West PO Box 83720 Boise ID 83720-0080 208 334-2301 Phone number (optional):
- michal Skrigs	Secretary of State use only

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