



CERTIFICATE OF ASSUMED BUSINESS NAME

FILED EFFECTIVE

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

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

2015 FEB -2 AM 9:50

SECRETARY OF STATE
STATE OF IDAHO

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

WESTERN Dog Crafts & STUFF

2. The true name(s) and business address(es) of the entity or individual(s) doing business under the assumed business name:

Name

Glenda Landon

Complete Address

4167 E 300 N
RIGBY, ID 83442

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Retail Trade | <input type="checkbox"/> Transportation and Public Utilities |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Services | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Mining |
| <input type="checkbox"/> Finance, Insurance, and Real Estate | |

Submit Certificate of
Assumed Business
Name and \$25.00 fee to:

Secretary of State
450 North 4th Street
PO Box 83720
Boise ID 83720-0080
208 334-2301

4. The name and address to which future correspondence should be addressed:

SAME AS 2. above

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

Signature: Glenda Landon

Secretary of State use only

Printed Name: Glenda Landon

IDaho SECRETARY OF STATE

Capacity/Title: SOLE PROPRIETOR

02/03/2015 05:00

CK:376300535 CT:158010 BH:1459987
 1@ 25.00 = 25.00 ASSUM NAME #2

Signature: _____

D 176461

Printed Name: _____

Capacity/Title: _____