



# 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 undersigned

gives notice of adoption of an Assumed Business Name

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

Doc's Belgian Farm

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

Name  
Cid E. Hayden, D. V. M.

Complete Address

P.O. Box 181, North Fork, Idaho 83466

3. The general type of business transacted under the assumed business name is;  
(mark only those that apply)

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

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

Phone number (optional): 208-865-2400

Cid E. Hayden, D. V. M.

P.O. Box 181

North Fork, Idaho 83466

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

Submit Certificate of  
Assumed Business  
Name and \$20.00 fee to:

Secretary of State  
700 West Jefferson  
Basement West  
PO Box 83720  
Boise ID 83720-0080  
208 334-2301

Signature: Cid E. Hayden, D. V. M.

Printed Name: Cid E. Hayden, D. V. M.

Capacity: Veterinarian / Owner

(see instruction # 8 on back of form)

Secretary of State use only

IDAHO SECRETARY OF STATE

06/14/1999 09:00  
CK: 1125 CT: 116772 BN: 225342

1 @ 20.00 = 20.00 ASSUM NAME # 2

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