



# 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 filling.

07 SEP -7 AM 8:32

SECRETARY OF STATE  
STATE OF IDAHO

FILED EFFECTIVE

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

VISIONS IN PLANNING

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

RAEL J CARROLL

865 PEARL DR. BLACKFOOT, ID 83221

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

- Retail Trade
- Wholesale Trade
- Services
- Manufacturing
- Finance, Insurance, and Real Estate
- Transportation and Public Utilities
- Construction
- Agriculture
- Mining

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

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

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

RAEL J CARROLL

865 PEARL DR

BLACKFOOT, ID 83221

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature:

Rael J. Carroll  
(signature required)

Printed Name:

Rael J. Carroll

Capacity/Title:

Owner

(see instruction # 8 on back of form)

Secretary of State use only

g:\comp\formalabn\formalabn.p65  
Revised 04/2003

IDAHO SECRETARY OF STATE  
09/07/2007 05:00  
CX: 184 CT: 158018 BH: 1074374  
1 @ 25.00 = 25.00 ASSUM NAME # 2

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