



# 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.**  
**Instructions are included on back of application.**

FILED EFFECTIVE

10 SEP 15 AM 8:35

SECRETARY OF STATE  
STATE OF IDAHO

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

VIRTUAL ASSISTANT

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

CHASITY BARBER

PO BOX 262 TROY ID 83871

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

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

CHASITY BARBER

PO BOX 262

TROY ID 83871

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

STERLING SAVINGS BANK

PO BOX 188

TROY ID 83871

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

Signature: Chasity A. Barber

Printed Name: CHASITY BARBER

Capacity/Title: OWNER

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Capacity/Title: \_\_\_\_\_

Secretary of State use only

0142135

IDAHO SECRETARY OF STATE  
09/15/2010 05:00  
CK: 100311111 CT: 251254 BH: 1238935  
1 @ 25.00 = 25.00 ASSUM NAME # 2