

## 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.

11 SEP 12 AM 9: 31

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

SECRETARY OF STATE

<ol> <li>The assumed business name which t business is:</li> </ol>	the undersigned use(s) in the transaction of
	Brian Carney, CPA
2. The true name(s) and <u>business</u> address business under the assumed business  Name  Carney Accounting Inc  (C191340)	ess(es) of the entity or individual(s) doing ss name:  Complete Address  PO Box 3489 Hailey, ID 83333
	ture Submit Certificate of Assumed Business
The name and address to which future correspondence should be addressed Carney Accounting Inc     PO Box 3489     Hailey, ID 83333	Occietary or otate
5. Name and address for this acknowled copy is (if other than # 4 above):	dgment ——
Signature:	Secretary of State use only
Capacity/Title: President	
Signature:	IDAHO SECRETARY OF STATE  99/12/2011 05:00
Printed Name:	CK: 4988 CT: 259457 BH: 1298811 1 8 25.88 = 25.88 ASSUM MANE # 2
Capacity/Title:	

abn.pmd Rev. 07/2010