

CERTIFICATE OF ASSUMED BUSINESS NAME

(Please type or print legibly. See instructions on file.)

FILED/EFFECTIVE



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:

Stafford Kennels

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	Complete Address
<u>Malinda Stafford</u>	<u>Co Clark Rd Marsing Id</u>
<u>William Stafford</u>	<u>83639</u>

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

<input checked="" type="checkbox"/> Retail Trade	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Transportation and Public Utilities
<input type="checkbox"/> Wholesale Trade	<input 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): _____

Malinda Stafford
PO Box 301
Marsing Idaho 83639

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

Secretary of State use only

D 5-2921

Signature: Malinda Stafford

Printed Name: Malinda Stafford

Capacity: owner

(see instruction # 8 on back of form)

Revision 2/97

at:compform@idaho.gov

IDAHO SECRETARY OF STATE
03/15/2002 05:00
CK: 415 CT: 158018 DH: 452361
1 @ 20.00 = 20.00 ASSUM NAME # 2