



# CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

**FILED/EFF.**

2002 MAY 31 AM 9: 59

Please type or print legibly.

NOTE: See instructions on reverse before filing.

SECRETARY OF STATE  
STATE OF IDAHO

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

Ponderosa Bookkeeping

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

Traci Hanninen

812 3rd St S. Nampa, Id

Justin Hanninen

812 3rd St S. Nampa, Id

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

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

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

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

4097 W. Niemann  
Meridian, Id 83642

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

Phone number (optional):

208-353-0714

Secretary of State use only

Signature: Traci Hanninen  
(signature required)

Printed Name: Traci Hanninen

Capacity/Title: owner

(see instruction # 8 on back of form)

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Revised 12/2001

IDAHO SECRETARY OF STATE  
05/31/2002 05:00  
CK: 1329 CT: 158010 BH: 468939  
1 @ 20.00 = 20.00 ASSUM NAME # 2

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